Florida Department of State

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(((H23000283575 3)))



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10:4 #4 51:	JUNE STATE CORPORATIONS SEE, FLORIDA
2823 AUS	DIVISION TALLA

Division of Corporations

Fax Number : (850)617-6383

From:

To:

Account Name : ROETZEL & ANDRESS Account Number : I20000000121 Phone : (239)649-6200 Fax Number : (239)261-3659

iter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.**

47	Address:			
MOTT	MUUI ESS:			

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN ASPIRE LIVING, LLC

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CUVER LETTER

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TO: Registration Se Division of Cor			
	IVING, LLC		
SUBJECT:	Name of Lin	aited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Sean M. Ellis, Esq.		
		Name of Person	
	Roetzel & Andress, LPA		
		Firm/Company	
	2320 First Street, Suite 10	00	
		Address	<u> </u>
	Fort Myers, FL 33901		
		City/State and Zip Code	<u> </u>
	sellis@ralaw.com	to be used for future annual report no	(itication)
For further information c	concerning this matter, please o	•	(Incaton)
Sean M. Eilis		239 337-3850 at ()	
Name o	f Person	Area Code Dayti	me Telephone Number
Enclosed is a check for the	he following amount:		
□ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Malling Addres Registration 5		Street Address: Registration Se	ection
Division of C	orporations	Division of Co	rporations
P.O. Box 632 Tallahassee, l		The Centre of 2415 N. Monre	Tallahassee oe Street, Suite 810

Tallahassee, FL 32303

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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ASPIRE LIVING, LLC				
Name of the Lim	ited Liability Company as (A Florida Limited Liabili	It now appears on our records.) ty Company)		
The Articles of Organization for this Limited 1	Liability Company were	filed on 10/26/2021	ar	nd assigned
Florida document number L21000463835	·			
This amendment is submitted to amend the fol	llowing:			
A. If amending name, enter the new name	of the limited liability	company here:		
The new name must be distinguishable and contain the	words "Limited Liability Co	ompany," the designation "LLC" or	the abbreviati	on "L.L.C."
Enter new principal offices address, if appli	icable:			
(Principal office address MUST BE A STRE	ET ADDRESS)			
Enter new mailing address, if applicable:	_			
(Mailing address MAY BE A POST OFFICE	<u> BOX)</u>			
B. If amending the registered agent and/or agent and/or the new registered office addresses	•	ess on our records, enter the	name of th	
				2023
Name of New Registered Agent:	CT Corporation System	em .		AUG 2
New Registered Office Address:	1200 South Pine Islan		У.Т., У.Т.,	15 E
		Enter Florida street address	en in	
	Plantation	, Florid		7
	(Din/	: Zin (Code

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

Laura Broderick Assistant Secretary DocuSign Envelope ID: B8217F9F-440F-49BD-973E-5E9FF3EE2321
11 amenuing Authorized rerson(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

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MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Aspire Living Holdings, LLC	c/o Strauss Troy Co., LPA	⊡Add
		150 East Fourth Street, 4th Floor	■Remove
		Cincinnati, OH 45202	□Change
			□Remove
			☐ Change
			
			□Remove
			☐ Change
			□Add
			□Remove
			Change
			□Add
			□Remove
			□Add
			□Remove
		<u> </u>	Change

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Il Manager, LLC, 525 Vine Street, Suite 1605, Cincinnati, OH 45202.
n the date of filing:
ffective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
2023
Signature of a member or authorized representative of a member
the Department of State's records. State's records. State's records. State's records. The 90th day af 2023