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Special Instructions to Fili	ng Officer:	

Office Use Only



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R. HURT 07/27/23 73 - 27 PH 3:06

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

## MOBILE IV NURSES FLORIDA, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Co	ompany were filed on $\frac{11/03/2}{}$	021	and assigned
Florida document number 1.21000475774	<u>_</u> .		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limit	ted liability company here:		
The new name must be distinguishable and contain the words "Limi	ted Liability Company," the designa	ation "LLC" or the abbrev	iation "L.L.C."
Enter new principal offices address, if applicable:			~->
(Principal office address MUST BE A STREET ADDR	ESS)		23 22
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Enter new mailing address, if applicable:		<u> </u>	<u></u>
(Mailing address MAY BE A POST OFFICE BOX)			<u> </u>
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registered agent and/or the new registered office addr  Name of New Registered Agent:	Cas here.		
New Registered Office Address:			
	Enter Florida str	reet address	
		Florida	<u> </u>
Name Designational Agentic Signature of sharping Healthand		λ	ip Code
New Registered Agent's Signature, if changing Registered			
I hereby accept the appointment as registered agent a provisions of all statutes relative to the proper and co accept the obligations of my position as registered ago being filed to merely reflect a change in the registered company has been notified in writing of this change.	mplete performance of my d ent as provided for in Chapt	luties, and I am fami er 605, F.S. Or, if th	liar with and is document is
	If Changing Registered Agent. <u>S</u>	ignature of New Registe	red Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	BUFFINGTON, MICHELLE	724 W 6TH AVE MESA, AZ 85210	
			₩ Remove
			□ Change
AMBR	AMBR HINKEL, PHILLIP	18332 W MONTEBELLO AVE LITCHFIELD PARK, AZ 85340	
			□ Change
AMBR	WEBER, JONATHAN	15564 W POINSETTIA DR SUPRISE, AZ 85379	
			■ Remove
			Change
AMBR	AMBR RICHARDSON, RYAN	6770 N SUNRISE BLVD #318 GLENDALE, AZ 85305	□ Add
			■ Remove
			Change
AMBR	Mobile IV Nurses Holdings, LL	18332 West Montebello Ave. Litchfield Park, AZ 85340	
			☐ Remove
			Change Change
			PM Signature
			SEE S Ad Remove
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- 11 amending any other information, enter change(s) nei			
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Effective date, if other than the date of filing:  (If an effective date is listed, the date must be specific and cannot be prior  Note: If the date inserted in this block does not meet the applied document's effective date on the Department of State's records	cable statutory filing requir	(optional) 90 days after filing.) Pursuant tements, this date will not be	o 605.0207 (3 e listed as th
the record specifies a delayed effective date, but no ) The 90th day after the record is filed.	ot an effective time, a	at 12:01 a.m. on the e	arlier of:
Dated July 26th 2023	·		
Phillip Hinkel Signature of a member or auth	orized representative of a mer	mber	_
Phillip C. Hinkel	······································	···-	
	ed name of signee	<del></del>	_

Page 3 of 3

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