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CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

DOMESTIC AMENDMENT FILING

NAME: MOBICARE, LLC

EFFECTIVE DATE:

XX ARTICLES OF AMENDMENT
RESTATED ARTICLES OF INCORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Alexxis Weiland -- EXT#

EXAMINER'S INITIALS:

COVER LETTER

		stration Section of Corp						
cup ic		MobiCare, L	LC					
SUBJEC	1; _	Name of Limited Liability Company						
The enclo	sed	Articles of A	mendment and fee(s) are sub	mitted for filing.				
Please ret	urn a	all correspon	dence concerning this matter	to the following:				
				Name of Person				
			c/o Corporate Service Com	npany				
				Firm/Company				
			1201 Hays Street					
			Address					
			Tallahassee FL 32301					
				City/State and Zip Code				
			compliance@cscglobal.com	to be used for future annual report notific	cation)			
For furthe	er inf	ormation cor	ncerning this matter, please ca	·	cattory			
Dilhara C	Guna	ratna- Ice Mi	iller LLP	317 221-2875 at ()				
<u> </u>		Name of I	erson	Area Code Daytime	Telephone Number			
Enclosed	is a	check for the	following amount:					
□ \$25.0	0 Fil	ing Fee	☐ \$30.00 Filing Fee & Certificate of Status	■ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)			

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MobiCare, LLC		
(Name of the Limited Liability Company (A Florida Limited Lia	as it now appears on our records.) bility Company)	
The Articles of Organization for this Limited Liability Company w	vere filed on 12/29/2021 and	l assigned
Florida document number		
his amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liability	ty company here:	
he new name must be distinguishable and contain the words "Limited Liability	Company," the designation "LLC" or the abbreviation	n "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS)		70.73
	- TE - C	<u> </u>
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		1
	15.7 15.7	Cig
3. If amending the registered agent and/or registered office egistered agent and/or the new registered office address here:	ce address on our records, enter the na	me of the
Name of Nam Basistand Assault		
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	Florida	
	City Zip C	oae

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

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	CAI Mobility Holdings, Inc.		
			■ Remove
			☐ Change
AMBR	Fleet Management Holdings, LLC		Add
			□ Remove
			□ Change
			☐ Remove - ☐ Change
			□ Add
			Remove
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ffective date, if other than the data an effective date is listed, the date must be solved. If the date inserted in this bloc ocument's effective date on the Dep	e specific and cannot be prior k does not meet the application			
e record specifies a delayed of The 90th day after the recor		an effective time, a	at 12:01 a.m. on	the earlier o
29th, December ated	2021			
Luis A. Avila				
	ignature of a member or autho			

Page 3 of 3

Filing Fee: \$25.00