

L220000027718

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

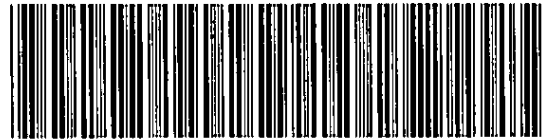
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22 SEP 26 PM 12:46

Division of Child Care

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ICAREVIP HEALTH, LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

LUIS TORRES

Name of Person

PRO ACCOUNTING AND FINANCIAL SOLUTIONS, INC.

Firm/Company

1915 NE 45TH STREET SUITE 101

Address

FORT LAUDERDALE FL 33308

City/State and Zip Code

PROACC@COMCAST.NET

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

LUIS E. TORRES

954 667-0673
at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

22 SEP 26 PM 12:46

RECEIVED
DIVISION OF CORPORATIONS

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

ICAREVIP HEALTH, 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 Company were filed on 01/12/2022 and assigned
Florida document number L22000027718.

This amendment is submitted to amend the following:

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 Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

1960 NE 47TH STREET

SUITE 105

FORT LAUDERDALE FL 33308

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

1960 NE 47TH STREET

SUITE 105

FORT LAUDERDALE FL 33308

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B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

1960 NE 47TH STREET SUITE 105

Enter Florida street address

FORT LAUDERDALE

City

, Florida 33308

Zip 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

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>	<u>Address</u>	<u>Type of Action</u>
MGR	DELONE GARCIA	1960 NE 47TH STREET	<input checked="" type="checkbox"/> Add
		SUITE 105	<input type="checkbox"/> Remove
		FORT LAUDERDALE FL 33308	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Change

12 SEP 2012 12:46 PM
PHILIP J. GARCIA
Remove
Change
Add

22 SEP 26 PM 12:46

22 SEP 26 PM 12:46

THE UNIVERSITY OF CHICAGO

09/19/2022

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated SEPTEMBER 19 2022

Archie Green

BERNARD GARCIA

Typed or printed name of signee