

122000107884

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

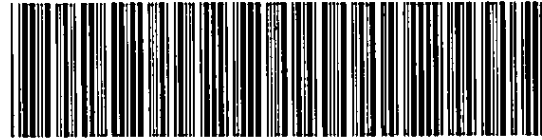
(Business Entity Name)

(Document Number)

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200387139522

07/15/22--01036--001 **25.00

FILED
2022 JUL 15 AM 8:24
SECRETARY OF STATE
TALLAHASSEE, FL

A. BUTLER

OCT 10 2022

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Sol Care Company
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:

Gabriela Marquez

Name of Person

Sol Care Company

Firm/Company

3818 Gunn Hwy, ~~Alma~~

Address

Greater Carrollwood Tampa, FL 33618

City/State and Zip Code

sunsetsoyluna@gmail.com

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

For further information concerning this matter, please call:

Gabriela Marquez

Name of Person

at (813) 517-4543

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 Filing 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 Address:

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

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

Sol Care Company

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

FILED

2022 JUL 15 AM 8:24

SECRETARY OF STATE

The Articles of Organization for this Limited Liability Company were filed on March 02, 2022 and assigned
Florida document number L22000107884.

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)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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:

Enter Florida street address

Florida

City

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

[illegible]

[illegible]

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

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 July 8 2022

Signature of a member or authorized representative

Gabriela Marquez
Typed or printed name of signee

D. BRUCE

FLORIDA DEPARTMENT OF STATE

No 06970

Date: 7-15-22

RECEIVED FROM:

Gabriela Marquez

the sum of

Twenty-five —

Dollars \$ 25.00

For the following:

Filing Fee

Sol Care Company

200307130000
07/15/22--01036--001 **25.00

NBuzgo

for Secretary of State

THIS MONEY PAID INTO THE STATE TREASURY

All receipts issued and papers filed subject to clearing and final payment of remittance check.