

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION -OF

VB Therapy L.L.C.				
(<u>Name of the Limite</u>	d Liability Compai A Florida Limited L	iy as it now appears on iability Company)	our records.)	
The Articles of Organization for this Limited Liz Florida document number L22000219333	nbility Company	were filed on 06/03	1/22	and assigned
This amendment is submitted to amend the follo	wing:			
A. If amending name, enter the new name of	the limited liabi	lity company here:		
The new name must be distinguishable and contain the wo	ords "Limited Liabili	ty Company," the design	ation "LLC" or the abb	eviation RSL.C."
Enter new principal offices address, if applica	ble:		L D MAS	F L
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE I	3 <i>0X)</i>		SE	PHID: 48
B. If amending the registered agent and/or reagent and/or the new registered office address		ddress on our recor	ds. <u>enter the name</u>	of the new registered
Name of New Registered Agent:	REGISTER	RED AGENTS	INC	
New Registered Office Address:	7901 4TH	ST N STE 300 Enter Florida st	reet address	
	ST. PETER		Florida 337	702
		Cny		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>	Address	Type of Action
AMBR	Victoria Baker	7901 4th St N STE 300	(X:Add
		St. Petersburg, FL 33702	□Remove
			□Change
			□Remove
			□ Add
			⊡Remove
			□Change
Aver-			⊡Add
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Effective date. If other than the date of filling: (Optional) (If an effective date is freak, the that must be specific and common be prior to date of filing or more than 90 days after filing.) Persuant to 605/1207/12 (If an effective date is freak, the that must be specific and common be prior to date of filing or more than 90 days after filing.) Persuant to 605/1207/12 (If an effective date is seried in this black does not meet the applicable stantory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. (the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the cord is filed. Dated December 9 2022 Signature of a nietuber or authorized representative of a member Riley Park	*****	ding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
Effective date, if other than the date of filing: (optional) If an effective date, is listed, the date must be specific and control be prior to date of filing or more than 90 days other filing.) Pursuant to 605:0207 (2) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as if document's effective date on the Department of State's records. the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of. (b) The 90th day after the ord is filed. Dated December 9 2022 Rither Tark Signature of a member or authorized representative of a member		
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Filing Fee: \$25.00