## L22000226677

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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Office Use Only





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## COVER LETTER

	sion of Cor		,	•
SUBJECT:	C. L. ELLC	JEN MEDICAL, LLC		• 47
NODELCE		Name of Limi	ted Lashility Company	···········
The enclosed	Articles of	Amendment and fee(s) are sub-	nutted for filing.	
Please return	all correspo	ndence concerning this matter	to the following:	
		Courtney Schneider		
			Name of Person	
		New Business Filing		, ND (ND )
			Firm Company	
8170 Washington Village Drive				
		- <del></del>	Address	
		Dayton, OH 45458		
			City/State and Zip Code	•
		orders@newbusinessfiling.c		
		E-mail address: ()	obe used for future annual report notification	
For further in	formation c	oncerning this matter, please ca	ill:	
Courtney Sel	hneider		888 701-6450	
	Name o	f Person	Area Code Daytime Telept	hone Number
Enclosed is a	check for the	he following amount:		
Œ \$25,00 F	iling Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & □ Certified Copy (additional copy is enclosed)	2 \$60,00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
Reg Div P.O	ling Address pistration S pision of C D. Box 632 lahassee.	Section Torporations 27	Street Address: Registration Section Division of Corporati The Centre of Tallaha 2415 N. Monroe Stre Tallahassee, FL 3230	assee et. Suite 810

## -ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Company as It now (A Florida Limited Liability Con	appears on our records.) mpany)
The Articles of Organization for this Limited Liability Company were filed forida document number. <u>L22000226677</u>	on <u>5/16/2022</u> and assigned
his amendment is submitted to amend the following:	
a. If amending name, enter the new name of the limited liability comp	any here:
he new name must be distinguishable and contain the words "Limited Liability Company	v." the designation "L.I.C" or the abbreviation "L.IC."
nter new principal offices address, if applicable:	20.22
Principal office address MUST BE A STREET ADDRESS)	
nter new mailing address, if applicable:	
Mailing address MAY BE A POST OFFICE BOX)	
. If amending the registered agent and/or registered office address on gent and/or the new registered office address here:	nour records, enter the name of the new register
Name of New Registered Agent:	
New Registered Office Address:	nter Flanda street address
	Florida

New Registered Agent's Signature, if changing Registered Agent:

C. L. ELLGEN MEDICAL, LLC

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.

Cin

H Changing Registered Agent, Signature of New Registered Agent

Zsp Code

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

Title	<u>Name</u>	Address	Type of Action
AMBR	Cynthia Ellgen	2081 NW 4th Street Apt 7	£Add
		Ocala, Florida 34475	CRemove
			[]Change
			TAdd
			TRemove
			Change (22)
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ective date, If other to effective date is listed, the term of the date inserted frument's effective date.	date must be specific an in this block does not	id cannot be prior to dat meet the applicable s	e of filmg or more than 90 statutory filing requiren	(optional) days after filing.) I nents, this date w	Pursuant to 605,020 ill not be listed a
cord specifies a delayed s filed.	l effective date, but no	t an effective time, a	a 12:01 a.m. on the ear	lier of: (b) The	90th day after the
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