122000229842

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



100389256491

08/18/22--01013--014 **25.00

CECRETARY OF STATE

A BUTLER AUG 27 2022

COVER LETTER

Registration Section

TO:

Division of Cor	porations		
	T LIFE CENTER, LLC		
SUBJECT:	Name of Lim	tited Liability Company	
RESILIENT LIFE CENTER, 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: Itzaurimar Monserrate			
Please return all correspo	endence concerning this matter	to the following:	
	Itzaurimar Monserrate		
		Name of Person	
	RESILIENT LIFE CENTE	ER, LLC	
	· · · · · · · · · · · · · · · · · · ·	Firm/Company	
	11304 Camus Ln		
		Address	
	Orlando FL 32824		
		City/State and Zip Code	
	- -		
	E-mail address: (to be used for future annual report noti	fication)
For further information c	oncerning this matter, please c	all:	
Itzaurimar Monserrate			
Name o	f Person		e Telephone Number
Enclosed is a check for the	ne following amount:		
■ \$25.00 Filing Fee		Certified Copy	Certificate of Status & Certified Copy
Registration 5	Section Corporations 27	Registration Sec Division of Cor The Centre of T	porations 'allahassee e Street, Suite 810

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

FILED

2022 JUN 13 AM 8: 44

RESII	IFNT I	IFF	CENTER.	וור

(Name of the Limited Liability Company as it now appears on our records) [All 138EE. F. (A Florida Limited Liability Company)

Articles of Organization for this Limited I	Liability Company	were filed on 5/17/2022	and assigned	
da document number L22000229842	·			
amendment is submitted to amend the fol	lowing:			
If amending name, enter the new name	of the limited lia	bility company here:		
new name must be distinguishable and contain the	words "Limited Liab	ility Company," the designation "	LLC" or the abbreviation "L.L.C."	
nter new principal offices address, if applicable:		11304 Camus Ln, Orlando	FL 32824	
rincipal office address MUST BE A STRE	ET ADDRESS)			
		 		
nter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BOX)		11304 Camus Ln, Orlando FL 32824		
If amending the registered agent and/or	registered office	address on our records, en	ter the name of the new regist	
ent and/or the new registered office addr	ess here:		·	
Name of New Registered Agent:	Itzaurimar Monserrate		·	
New Registered Office Address:	11304 Camus	Ln,		
		Enter Florida street ad	dress	
	Orlando		Florida ³²⁸²⁴	
		City	Zip Code	

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
MGR	Itzaurimar Monserrate	11304 Camus Ln, Orlando FL 32824	🖼 Add
			🗆 Remove
			☐Change
			□Add
			Remove
			Change
			□Add
			□Remove
			□Change
			□ A d d
		□Remove	
			□Change
			□ A d d
			□Remove
			□Change
	····		□Add
			□Remove
			Change

				-	
 "					
 					
			· · · · · · · · · · · · · · · · · ·		
· · · · · · · · · · · · · · · · · · ·					
	W				
		<u> </u>			
 					
		_			
ective date, if other than the effective date is listed, the date material fithe date inserted in this becament's effective date on the I	ust be specific and cannot be block does not meet the a	pplicable statutor	ng or more than 90 days	optional) after filing.) Pursuant to 605 is, this date will not be liste	.020 ed a
ecord specifies a delayed effecti is filed.	ive date, but not an effect	tive time, at 12:01	a.m. on the earlier of	of: (b) The 90th day after	r the
June 3,	2022	ſ			
		F			
		<u>'</u>	_		
	\	_ 1	•		
	Signature of a member of	-authorized represe	ntative of a member		