To: 18506176383 From: 12147128131 Date: 09/07/22 Time: 10:35 AM Page: 01/04



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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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LEGALINC CORPORATE SERVICES INC.

Account Number : 120180000011 Phone : (844)386-0178 Fax Number : (214)317-4754

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:__

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

MEDBLESS LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00



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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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MEDBLESS LLC		
(Name of the Limited Liability Company (A Florida Limited Lia	as it now appears on our records.) ibility Company)	
The Articles of Organization for this Limited Liability Company with Markov $\frac{1.22000240838}{1.000000000000000000000000000000000000$	ere filed on 05/24/2022	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabili	ty company here:	
Wife for Hire LLC		
The new name must be distinguishable and contain the words "Limited Liability	y Company," the designation "LLC" or the ab	breviation "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 adagent and/or the new registered office address here:	dress on our records, enter the nam	e of the new registered
Name of New Registered Agent: New Registered Office Address:		2022 SEP - SE CARE IN
137 148 131 140 131 140 131	Enter Florida street address, Florida	TO PA
New Registered Agent's Signature, if changing Registered Agent:	City	7.φCod £ . 55
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete p accept the obligations of my position as registered agent as pr	erformance of my duties, and I am f	amiliar with and

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

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If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

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MGR =	Manager	
AMBR =	Authorized	Member

<u>Title</u>	Name	Address	Type of Action
			ПRemove
			□Change
			□ Add
			□Remove
			Change
			□Remove
			Change
			□ Add
			□Remove
			☐ Change
			Remove
			□Change
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Note:	tive date, if other the ffective date is listed, the c . If the date inserted in hent's effective date or	this block does not	i meet the applic	able statutory filing	(option we than 90 days after f requirements, this	nal) ding) Pursuant to 605,0207 date will not be listed as
ne recor ord is fi		effective date, but n	ot an effective ti	me, at 12.01 a.m. o	n the earlier of. (b)	The 90th day after the
	August 12th		2022	·		
Dated			\sim			
Dated			XP.			
Dated		Signature of	a member or author	orized representative o	of a member	

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