

L22000244789

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

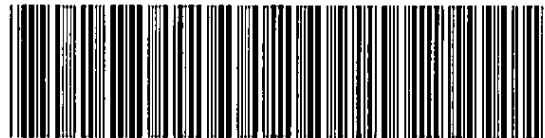
(Document Number)

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LLC N/C Amend

09/28/22--01005--017 **80.00

RECEIVED
2022 SEP 28 AM 11:29
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED
2022 SEP 28 PM 12:49
TALLAHASSEE, FLORIDA

A. RAMSEY
SEP 28 2022

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: STATX PERFORMANCE REHABILITATION 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:

SHAWN MCDERMOTT
Name of Person

STATX PERFORMANCE REHABILITATION LLC
Firm/Company

8151 ULMONT RD
Address

Largo FL 33771
City/State and Zip Code

SHAWN M @ SYNERGY PERFORMANCE REHAB. COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

SHAWN MCDERMOTT at (850) 604 1234
Name of Person 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

I, Shawn McDermott WILL NOT REINSTATE NOR

REVOKE THE DISSOLUTION OF SYNERGY PERFORMANCE REHABILITATION LLC

DOCUMENT NUMBER L 22000 325043 AND I

RELEASE THE NAME FOR USE.



A handwritten signature, appearing to be 'S', is written over a horizontal line.

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

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

The Articles of Organization for this Limited Liability Company were filed on 5/26/22 and assigned.

Florida document number 222000244789

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

SYNERGY PERFORMANCE REHABILITATION LLC
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)

936 BAYSHAW DR
TARPON SPRINGS FL 34689

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)

If 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 record is filed.

Dated 9/18/2022.

Signature of a member or authorized representative of a member

Shawn McDermott

Typed or printed name of signee