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COVER LETTER

Tallahassee, FL 32314

TO: Registration Se Division of Cor		•	
SUBJECT: <u>Chri</u>	SHINE'S CONCIE	erge Nursing Content of Content o	ire UC
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Christine	B. Hofstra	
	Christine's	Concierge Car Firm/Company	re LLC
	966 1	Molly Cir	
		- Address	
	Christinehofst E-mail address: (i	City/State and Zip Code Val Protonmail. Cor to be used for future annual report notif	PH 1:2
For further information of	concerning this matter, please ca		· 元 6
Christine Name o	Hofstra of Person	at (941) 180- Area Code Daytime	4123 Telephone Number
Enclosed is a check for the	he 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	Street Address: Registration Sec	
Division of C P.O. Box 632		Division of Cor The Centre of T	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Christine's Concierge Nursing Care LLC

(Name of the Limited Liability Company as it now appear on our records.)

(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Com	ipany were filed on $\underline{-9}$		and assigne
If amending name, enter the new name of the limited liability company here: Christine's Concierge Care new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." ter new principal offices address, if applicable: incipal office address MUST BE A STREET ADDRESS) ter new mailing address, if applicable: ailing address MAY BE A POST OFFICE BOX) See P III			
This amendment is submitted to amend the following:			
Christine's Concierge	e Care	LLC _	
The new name must be distinguishable and contain the words "Limited	Liability Company," the de	signation "LLC" or the a	ibbreviation "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRES	<u> </u>		
			- G - G - G - G - G - G - G - G - G - G
Enter new mailing address, if applicable:		<u> </u>	·
•••			
(Mailing address MAY BE A POST OFFICE BOX)		<u></u>	
(Mailing address MAY BE A POST OFFICE BOX)			
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B. If amending the registered agent and/or registered o	ffice address on our re		<i>ਦ</i> ਜ
B. If amending the registered agent and/or registered or agent and/or the new registered office address here:	ffice address on our re		<i>ਦ</i> ਜ
B. If amending the registered agent and/or registered of agent and/or the new registered office address here: Name of New Registered Agent:	ffice address on our re		<i>ਦ</i> ਜ
B. If amending the registered agent and/or registered of agent and/or the new registered office address here: Name of New Registered Agent:		ecords, enter the num	<i>ਦ</i> ਜ
B. If amending the registered agent and/or registered of agent and/or the new registered office address here: Name of New Registered Agent:		ecords, enter the num	<i>ਦ</i> ਜ

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
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ate, if other than the date of filing:	(optional)	
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 60:	
e date inserted in this block does not meet the applicable statutory filing requireffective date on the Department of State's records.	rements, this date will not be list	ited
cifies a delayed effective date, but not an effective time, at 12:01 a.m. on the e	earlier of: (b) The 90th day after	er th
Tuly 3 . 2023.		
Signature of a member or anthorized representative of a me		
Signature of a member or anthorized representative of a member of of	mber	

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