L22000279103

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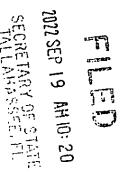
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09/19/22--01026--021 **25.00

09/19/22--01026--024 **5.00



COVER LETTER

Division of Cor				•	
SUBJECT: Emaire H	lealth USA, LLC				
SOBJECT.	Name of Lin	ited Liability Company	-		
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.			
Please return all correspo	indence concerning this matter	to the following:			
	Ashly Mae Guernac	cini			
		Name of Person			
	atCause Law Office	, PLLC			
		Firm/Company			
	131 N Garden Avenue	9			
		Address	_		
	Clearwater, Florida	33755		2022 SEC T/	
		City/State and Zip Code		SEP SEF	-
	ashly@atcauselaw.cor	m		AHV SAM	(= {*
		to be used for future annual report notit	ication)	%	وري وري الماسية
For further information c	oncerning this matter, please c	all:		2022 SEP 19 AM 10: 20 SECRETARY OF STATE TALLARASSEE FU	بن. افر
Ashly Mae Guernace	cini	at (727) 477-2255		20 ATE	
Name o	f Person	Area Code Daytimo	: Telephone Number		
Enclosed is a check for the	ne following amount:				
□ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified (e of Status &	
Mailing Addres Registration S	Section	Street Address: Registration Sec			
Division of C	orporations	Division of Corp	porations		

P.O. Box 6327

Tallahassee, FL 32314

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

DocuSign Envelope ID: E7A234AF-6E23-4CFA-8EE7-81C24A323A49

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Emaire Health USA, LLC			<u></u>
(<u>Name of the Limite</u> (d Liability Company as it now A Florida Limited Liability Con	<u>appears on our records.</u>) npany)	
The Articles of Organization for this Limited Lia Florida document number L22000279103	nbility Company were filed	on 06/20/2022	and assigned
This amendment is submitted to amend the follo	wing:		
A. If amending name, enter the new name of	the limited liability comp	any here:	
The new name must be distinguishable and contain the wa	ords "Limited Liability Company	y," the designation "LLC" or the abb	reviation "L.L.C."
Enter new principal offices address, if applica	ble:		
(Principal office address MUST BE A STREE)	(ADDRESS)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE I B. If amending the registered agent and/or registered office address	gistered office address on		2022 SEP 19 ANIO: SECRETARY OF STATEMENT OF
Name of New Registered Agent:	Ashly Mae Guernaccir	ni	
New Registered Office Address:	131 N Garden Avenue	e nter Florida street address	
	Clearwater	Florida <u>33</u>	755
	City	, Fiorida <u>00</u>	Zip Code
N D C LA A SC . COL C D			

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.

Isl Ashly Mae Guernaccini

If Changing Registered Agent, Signature of New Registered Agent

DocuSign Envelope ID: E7A234AF-6E23-4CFA-8EE7-81C24A323A49 trainenting Authorized rerson(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	Steven Parchment	4058 Timber Cove Lane	□Add
		Weston, Florida 33332	⊠Remove
			☑Change
AMBR	Steven Parchment	4058 Timber Cove Lane	
		Weston, Florida 33332	□Remove
			Change
			□Add
			□Remove
			Change
			□Add 78: 28:
			A CRITICAL MOVE TO
			Change
			TIPLE 20
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Offect	ive date, if other than the date of filing:	. 405 0207
f an eff <u>Note:</u>	ective 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 If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be	
fan efl <u>Note:</u>	ective 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	
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Filing Fee: \$30.00