

122000290448

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

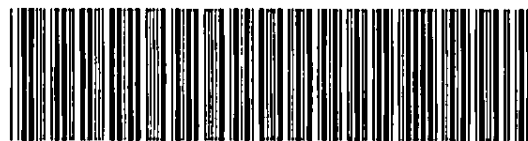
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

[Handwritten Signature]



700393952917

09/16/22--01032--018 **30.00

22 SEP 16 AM 10:04
DIVISION OF CORP. CANTON

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Optimal Research Sites, LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fees(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Kimberlee Del Campo
Name of Person

Optimal Research Sites, LLC
Firm/Company

2541 S. Uduza Ave Suite 100
Address

Orange City, FL 32763
City/State and Zip Code

kdelcampo@optimalresearchsites.net
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Kimberlee Del Campo at (386) 216 8397
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

22 SEP 16 AM 10:04

SECTION OF CORPORATIONS

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

Optimal Research Sites, 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 6/27/22 and assigned Florida document number 62000290448.

This amendment is submitted to amend the following:

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

N/A

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)

2541 S. Volusia Ave
Suite 100
Orange City, FL, 32763

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

2541 S. Volusia Ave
Suite 100
Orange City, FL, 32763

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

22 SEP 16 AM 10:04

FILED
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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

MCIR Kimbraz Del Campo 2541 S Volusia Ave Suite 100
Orange City, FL 32763
Error KN
(Change Address)

22 SEP 16 AH10:04

22 SEP 16 AM 10:04

(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)

Dated Sept 13 2022

Signature of a member of author

Signature of a member or authorized representative of a member

Kimberlee Del Campo
Typed or printed name of signer

Typed or printed name of signee