122000329811

(Requestor's Name)
	(A.J.)
(Address)
	Address)
(City/State/Zip/Phone #)
PICK-UP	WAIT MAIL
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(Business Entity Name)
(Document Number)
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Special Instructions to	Filing Officer
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A. BUTLEN AUG 23 2022

COVER LETTER

	gistration Sec vision of Corp			
SUBJECT:		ost Acute HoldCo, LLC		
SUBJECT.		Name of Limi	ted Liability Company	
The enclose	d Articles of A	Amendment and fee(s) are sub-	mitted for filing.	
Please retur	n all correspor	ndence concerning this matter	to the following:	
			Name of Person	
			Firm/Company	
			Address	
			City/State and Zip Code	
		E-mail address: ()	o be used for future annual report not	ification)
For further i	information co	ncerning this matter, please ca	dl:	
	Name of	Person	at () Area Code Daytin	ne Telephone Number
Enclosed is	a check for the	e 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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Blue Lake Post Acute HoldCo, LLC

2022 AUG 22 AM 10: 17

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(Name of the Limited Liability Com	pany as it now appears on ou	records.)
(Name of the Limited Liability Com (A Florida Limite The Articles of Organization for this Limited Liability Compar	d Liability Company)	LANCASES, EL
The Articles of Organization for this Limited Liability Compar	ny were filed on On 201202	and assigned
Florida document number 1.22000329811		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liz	ability company here:	
The new name must be distinguishable and contain the words "Limited Lia	ibility Company," the designation	on "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		<u></u>
(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 offic	e address on our records	enter the name of the new regist
gent and/or the new registered office address here:		
Name of New Registered Agent:		
New Registered Office Address:	5555	
-	Enter Florida stree	t 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

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
MGR	Kenneth Funk	851 NE 1st Avenue, Villa 701	
		Miami, FL 33132	□Remove
			□ Change
			
			□Remove
			Change
			□Add
			Remove
			Change
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			☐ Remove
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Note: If the date is in	ther than the date of sted, the date must be spe serted in this block do e date on the Departm	xific and cannot be prices not meet the anni-	or to date of filing or micable statutory filin	(option nore than 90 days after file og requirements, this d	al) ing.) Pursuant to 605.0207 ate will not be listed as
e record specifies a odd is filed.	elayed effective date,	but not an effective	time, at 12:01 a.m.	on the earlier of: (b)	The 90th day after the
	1	2022	···		
Dated August 19		. ~			
Dated August 19	hulls				
Dated August 19	Signatu Signatu	re of a member or aud	orized representative	of a member	