Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H22000404077 3)))



H220004040773ABC-

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : 120000000019

: (305)552-5973

Fax Number

: (305)675-5944

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email	Address:		· · · · · · · · · · · · · · · · · · ·
-------	----------	--	---------------------------------------

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN WE CARE FAMILY PRACTICE LLC

		1 JANBLEY
Certificate of Status	0 UE	L. SLEY
Certified Copy	0	2022
Page Count	02	-
Estimated Charge	\$25.00	

Electronic Filing Menu

Corporate Filing Menu

Help

Articles of Amendment to LLC Articles of Organization of

The Articles of Organization for this Limited Liability Compa- October 11, 2022 and assigned Florida docume	ny were filed on ont number
<u>L22000436355</u>	
This amendment is submitted to amend the follow	ving;
Change Physical and Mailing address to: 15600 SW 288 St Homestea	ad, FL 33033
	
	22 A
	3 3
	
	-> 5
	
These articles of amendment were adopted on11/30/2022	·
Dated	
(1/1)	
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
Signature of a member or authorized representative of a me	ember
Alfra de Demana	
Alfredo Romero Typed or printed name of signee	
New Registered Agent's Signature, if changing Registered Agent: Thereby accept the appointment as registered agent. I am familiar with and accept position.	ot the obligations of the
Signature of New Registered Agent, if changing	