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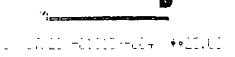
(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	<u></u>
ECEIVE;		
	MAR - 6 2023	

Office Use Only



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S. FRANCLIN MAY 2 - 2023

COVER LETTER

Registration Section
Division of Corporations

TO:

SAMPLE I	DIAGNOSTICS LLC			
SUBJECȚ:	Name of Lim	nited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	Abubakr Chaudhry			
		Name of Person		
	ANC Family Investments	LLC		
		Firm/Company		
	6523 Canopy Drive		202	
		Address		4
	Atlanta, Georgia 30328		2023 HAR - 6 97 12: 34 cation)	
	.,,,	City/State and Zip Code	S: 😩	
	aachaudhry9@gmail.com		2. Z.	
	E-mail address: (to be used for future annual report notifi	cation)	
For further information e	oncerning this matter, please c	all:	gri 🕌	
Abubakr Chaudhry		561 319-1668		
Name o	f Person	at () Area Code Daytime	Telephone Number	
Enclosed is a check for the	ne 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 Addres Registration S Division of C	Section	Street Address: Registration Sec Division of Corp		
P.O. Box 632	.7	The Centre of Ta	illahassee	
Tallahassee,	FL 32314	2415 N. Monroe	Street, Suite 810	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SAMPLE DIAGNOSTICS 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 $\frac{01/09/2023}{1}$ and assigned Florida document number 1.23000016830 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation, Enter new principal offices address, if applicable: (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 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

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
AMBR	CHAUDHRY, ABUBAKR	7647 NW 127TH MANOR	□Add
		PARKLAND, FL 33076	■Remove
AMBR	ANC Family Investments LLC	6523 Canopy Drive	≣ Add
		Atlanta, GA 30328	□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□ Change
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			□Change
			□Add
			Remove
			□ Change

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			1-	
fective date, if other than the da in effective date is listed, the date must be ote: If the date inserted in this block becument's effective date on the Depar	specific and cannot be p does not meet the ap	prior to date of filing or a plicable statutory fili	(optional more than 90 days after filing ng requirements, this date	g.) Pursuant to 605.0207
ecord specifies a delayed effective da is filed.	te, but not an effecti	ve time, at 12:01 a.m	on the earlier of: (b) T	he 90th day after the
nted FEBRUARY 25	. 102	3		
	nature of a member or	authorized representativ	e of a member	

Filing Fee: \$25.00

Typed or printed name of signee