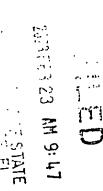
L23000037332

(Re	questor's Name)	
(Ad	dress)	
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PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Name)	
(Do	ocument Number)	
Certified Copies	Certificates of	Status
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Special Instructions to	Filing Officer:	

Office Use Only



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Tallahassee, FL 32301-2607 850-558-1500, Ext: 61594

To: Department Of State, Division Of Corporations

From: Eyliena Baker

Ext: 61594 Date: 02/23/23 Order #: 520993-1

Re: NH2 MANAGEMENT, LLC Processing Method: Routine

DISTRICT OF THE STATE OF THE ST

123 FEB 23 PM 3: 36

TO WHOM IT MAY CONCERN:

Enclosed please find: which amendment

Amount to be deducted from our State Account: \$25.00 - FL State Account Number:

I20000000195 Authorization:

Please take the following action:

File in your office on basis

Issue Proof of Filing

Special Instructions:

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

TO: Registra Division					
NHC	MANA	GEMENT, LLC			
SUBJECT:		Name of Lim	ited Liability Company		
The enclosed Arti	cles of A	mendment and fee(s) are sub-	mitted for filing.		
Please return all c	orrespon	dence concerning this matter	to the following:		
		Christopher R. O'Brien, Es	q.		
			Name of Person		
		Woods Weidenmiller Mich	netti & Rudnick LLP		
			Firm/Company		
		9045 Strada Stell Court, St	nite 400		
		***	Address		
		Naples, FL 34109			
			City/State and Zip Code		
		cobrien@lawtirmnaples.com	n to be used for future annual		
For further inform	ation co	ncerning this matter, please ca		report notificati	on)
Christopher R. O'				5-4070	
			at ()		
	Name of l	Person	Area Code	Daytime Tel	ephone Number
Enclosed is a chec	k for the	following amount:			
\$ \$25,00 Filing	Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee Certified Copy (additional copy is end		☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing A			Street A		
Registration Section Division of Corporations		Registration Section Division of Corporations			
P.O. Bo				ntre of Talla	

Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

DocuSign Envelope ID: 3FDC736C-406D-41D1-9395-E24864BC41A8

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ED

NH2 MANAGEMENT, LLC

2023 F 13 23 AM 9: 47

(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 January 26, 2023 and assigned Florida document number L23000037332 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 "L.L.C." 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.

DocuSign Envelope ID: 3FDC736C-406D-41D1-9395-E24864BC41A8 in amending 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
AMBR	Thomas Houchin	700 Industrial Blvd, Suite 2	
		Naples, FL 34104	_
			□Change
MGR	Thomas Houchin	700 Industrial Blvd, Suite 2	■Add
		Naples, FL 34104	□Remove
			□Change
MGR	Annette Nader	112 Inagua Ln	Add
		Bonita Springs, FL 34134	□Remove
			□Change
			□Add
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ectiv	e date, if other than the date of filing: (optional) tive 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 605.0	
n effec ste: Ti	tive date is listed, the date must be specific and cannot be prior to date of tiling or more than 90 days after filing.) Pursuant to 605.0 The date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed	(207 Las
cumei	nt's effective date on the Department of State's records.	
,		
ecora is file	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after t 1.	ine
	2/22/2022	
ted _	2/23/2023 :	
	•	
	Thomas Houclin	