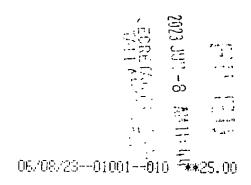
## L230000 40715

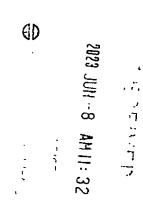
	(Requestor's Name)
	(Address)
	(Address)
	(City/State/Zip/Phone #)
PICK-UP	WAIT MAIL
	(Business Entity Name)
	(Dosiness Entry Marrie)
	(Document Number)
	,
Certified Copies	Certificates of Status
	5" 0"
Special Instructions to	Filing Officer.
·	

Office Use Only



400409889624





## **COVER LETTER**

TO: Registration Se Division of Cor			
	Wellness & Rehab LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Jeffrey Jerkins		
	<del></del>	Name of Person	
	Browning Accounting Gro	шр Согр	
		Firm/Company	
	1725 NE Darlich Ave		
		Address	207 35
	Jensen Beach, FL 34957		SECUE ATTACA
		City/State and Zip Code	7 7 1 7 0
	browningacct@gmail.com		
		to be used for future annual report not	ification)
For further information of	concerning this matter, please c	all:	
Jeffrey Jerkins		772 266-4712	·
Name o	of Person	Area Code Daytin	ne Telephone Number
Enclosed is a check for the	he 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	Section	Street Address: Registration Sc	
Division of Corporations P.O. Box 6327		Division of Co The Centre of	
Tallahassee,			pe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Woolbright Wellness & Rehab LLC			
(Name of the Limited Liability Compa- (A Florida Limited L	ny as it now appears on our records.) Hability Company)		
The Articles of Organization for this Limited Liability Company	were filed on $\frac{01/16/2023}{}$ and assign	and assigned	
lorida document number L23000040715			
his amendment is submitted to amend the following:			
a. If amending name, enter the new name of the limited liabi	ility company here:		
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" or the abbreviation "L.L.C	2.11	
Enter new principal offices address, if applicable:			
Principal office address MUST BE A STREET ADDRESS)			
		<u>; ;                                   </u>	
Inter new mailing address, if applicable:			
Mailing address MAY BE A POST OFFICE BOX)		;	
3. If amending the registered agent and/or registered office a gent and/or the new registered office address here:	address on our records, <u>enter the name of the new r</u>	egist	
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street 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 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	Cedric Davis	852 W Coco Plum Circle	≣Add
		Plantation, FL 33324-3712	□Remove
			□Add
			□Remove
			Change
			BAdd
			Remove
			□Change
		·	□Add
			□Remove
			□Change
			□Add
			Remove
			☐ Change
			🗀 Add
		· · · · · · · · · · · · · · · · · · ·	🗆 Remove
			□Change

			· <del>-</del>	
			<u></u>	
	<u> </u>			
			<del></del>	
-				
	·F-7	L		
-	TO THE STATE OF TH		<u> </u>	•
-				
<del>-</del>			<u> </u>	
			- #\$	
ffective date if other that	n the date of filing:	Contions	al)	
an effective date is listed, the date	n the date of filing: te must be specific and cannot be prior to date of file his block does not most the applicable statute	ling or more than 90 days after fili	ng.) Pursuant to 605.	.0207 (
ate: If the date inserted in the	the Department of State's records.	ory ming requirements, and de	ic wil not be list	.u as t
ote: If the date inserted in the				
ote: If the date inserted in the ocument's effective date on the ocument's effective date.				
ote: If the date inserted in the ocument's effective date on the ocument's effective date on the ocument's effective date of the ocupanism ocupanism of the ocupanism	fective date, but not an effective time, at 12:0	) I a.m. on the earlier of: (b)	The 90th day after	the
ote: If the date inserted in the ocument's effective date on the ocument's effective date on the ocument's effective date on the ocument's effective date of the ocument's effective date on the ocument's effective date of the ocument's effective date ocument's effetive date ocument's effective date ocument'		) I a.m. on the earlier of: (b)	The 90th day after	the
ote: If the date inserted in the ocument's effective date on the ocument's effective date on the ocument's effective date of the ocupanism ocupanism of the ocupanism	fective date, but not an effective time, at 12:0	) I a.m. on the earlier of: (b)	The 90th day after	the
ote: If the date inserted in the ocument's effective date on the ocument's effective date of the ocument's effective date		) I a.m. on the earlier of: (b)	The 90th day after	the

Filing Fee: \$25 Of