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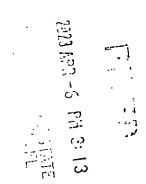
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COVER LETTER

	Registration Division of C			
SUDIE/		cal Therapy, LLC		
SUBJEC	.1:	Name of Lim	nited Liability Company	
The enclo	osed Articles	of Amendment and fee(s) are sub	omitted for filing.	
Please re	turn all corres	pondence concerning this matter	to the following:	
		Thais Preston		
			Name of Person	
		TP Physical Therapy, LLC	<u>C</u>	
			Firm/Company	
		649 Ixora Lane		
			Address	 ,
		Plantation, FL 33317		- 3
		· · · · · · · · · · · · · · · · · · ·	City/State and Zip Code	fication) - 6
		thaispreston@gmail.com		
			to be used for future annual report noti	fication)
For furthe	er information	concerning this matter, please c	all:	P
			at ()	
	Name	e of Person	Area Code Daytim	e Telephone Number
Enclosed	is a check for	the following amount:		
■ \$25.0	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 Addr Registration Division of P.O. Box 6: Tallahassce	n Section Corporations 327	Street Address: Registration Se Division of Cor The Centre of T 2415 N. Monro Tallahassee, FL	porations Callahassee e Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

TP Physical Therapy, LLC		
(Name of the Limited Liabili (A Florida	ty Company as It now appears on our reco a Limited Liability Company)	rds.)
The Articles of Organization for this Limited Liability C	Company were filed on 02/07/2023	and assigned
Florida document number L23000069578	<u>_</u> .	
This amendment is submitted to amend the following:	the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." plicable: REET ADDRESS)	
A. If amending name, enter the new name of the lim	ited liability company here:	
The new name must be distinguishable and contain the words "Lim	ited Liability Company," the designation "LI	LC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDR	RESS)	\
		<u> </u>
Enter new mailing address, if applicable:		- 0
(Mailing address MAY BE A POST OFFICE BOX)		ω
		Till w
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	d office address on our records, <u>ent</u> e	er the name of the new registere
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street addr	ess
 		FloridaZip Code
	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, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Thais Preston	649 Ixora Lane, Plantation FL 33317	= Add
			□ Remove
			□Change
			□ Add
			□ Remove
			DChange
			\.\f\(\f\)Add
			Remove
			□Change
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an effective date is listed, the date note: If the date inserted in this	nust be specific and cannot be prior to block does not meet the applicab		days after filing.) Pur-		
an effective date is listed, the date note: If the date inserted in this occurrent's effective date on the	nust be specific and cannot be prior to block does not meet the applicab Department of State's records.	ble statutory filing requiren	days after filing.) Pur- nents, this date will	not be listed	d as
an effective date is listed, the date note: If the date inserted in this ocument's effective date on the record specifies a delayed effective date of the record specifies a delayed effective date of the record specifies and delayed effective date of the record	nust be specific and cannot be prior to block does not meet the applicab	ble statutory filing requiren	days after filing.) Pur- nents, this date will	not be listed th day after	d as
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an effective date is listed, the date note: If the date inserted in this ocument's effective date on the record specifies a delayed effect is filed. March 14th	nust be specific and cannot be prior to block does not meet the applicab Department of State's records.	ble statutory filing requiren	days after filing.) Purnents, this date will lier of: (b) The 90	th day after	d as
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an effective date is listed, the date note: If the date inserted in this ocument's effective date on the record specifies a delayed effect is filed. March 14th	nust be specific and cannot be prior to block does not meet the applicable Department of State's records. tive date, but not an effective time 2023	ole statutory filing requirent the statutory filing requirent filing requir	days after filing.) Purnents, this date will lier of: (b) The 90	th day after	the
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