L23000232353

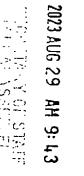
(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





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COVER LETTER

TO:

Registration Section

Division of Cor	porations		,
	M SPRINGS MEDICAL CENT	TER LLC	•
SUBJECT:	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:	
	PANKAJ BILL SAWHNE	EY	
		Name of Person	·
	2901 PALM SPRINGS M	EDICAL CENTER LLC	
	····	Firm/Company	···
	531 N OCEAN BLVD AP	T 201	
		Address	
	POMPANO BEACH, FL.	33062	
		City/State and Zip Code	
	BILLSAHNI@GMAIL.CO		·
For further information of	oncerning this matter, please c	to be used for future annual report not all:	tification)
PANKAJ BILL SAWH?	NEY	954 914-6467	
Name of Person		at () Area Code Daytir	ne 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 Address Registration !	Section	<u>Street Address:</u> Registration So	ection
Division of C P.O. Box 632	-	Division of Co The Centre of	-
Tallahassee, 1			oe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Comp. (A Florida Limited	any as it now appears on our reco	ords.)
The Articles of Organization for this Limited Liability Company Florida document number L23000232353	were filed on $\frac{\text{MAY }11,2023}{\text{MAY }11,2023}$	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	oility company here:	
2480 CONGRESS TOWN CENTER LLC		
The new name must be distinguishable and contain the words "Limited Liabi	ility Company," the designation "L	JLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	2480 S CONGRESS AVEN	IUE
(Principal office address MUST BE A STREET ADDRESS)	WEST PALM BEACH, FL	33406
		25 23
		i de T
Enter new mailing address, if applicable:		29
Mailing address MAY BE A POST OFFICE BOX)		
		Es e
		- - 2
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>ent</u>	er the name of the new regi
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street add	lress
		Florida
	City	Zip Code

New Registered Agent's Signature, if changing Registered Agent:

2001 DATA CODDINGS AUDICAL CONTEDITO

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
			□Add
			□Remove
		<u> </u>	
			□Add
			□Remove
			□Change
			Change
			□Add
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			Change
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			□Change
			Add

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lective date is list	ed, the date must be sp	pecific and cannot be	proor to date of:	filing or more than	ı 90 days after filin	g.) Pursuant to 605.
	erted in this block de date on the Departr			tory ming requi	rements, this dai	e will not be listo
d specifies a de led.	elayed effective date	, but not an effecti	ive time, at 12	:01 a.m. on the	earlier of: (b)	he 90th day after
red.						
_Augu	St 238	, 20	Z3.	0		
				//		

Typed or printed name of signee

PANKAJ BILL SAWHNEY