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(Requestor's Name)
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PICK-UP WAIT MAIL
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9/29/2023

COVER LETTER

`O:	Registration Se Division of Cor			4 .s
ימו מוני	Suffield Ho	ealth and Wellness LLC	•	•
UBJEC	<u></u>	Name of Lim	ited Liability Company	
The encl	osed Articles of	Amendment and fee(s) are sub	mitted for filing.	
'lease re	eturn all correspo	endence concerning this matter	to the following:	
		Kelsey		
			Name of Person	
•)	ZenBusiness Inc		
	1		Firm/Company	
		5511 Parkcrest Dr., STE 1	03	
			Address	
		Austin, TX 78731		
			City/State and Zip Code	
		fulfillment@zenbusiness.co		
اس کی سا		E-mail address: (oncerning this matter, please of	to be used for future annual report not	ification)
or turti	ier information c	oncerning this matter, please co	411.	
Celsey o	c/o ZenBusiness	Inc	844 493-6249 at ()	
	Name o	f Person		ne Telephone Number
inclosed	l is a check for th	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	_	<u>Street Address:</u> Registration Se	ection
	Division of C		Division of Co	
	P.O. Box 632	7	The Centre of	Fallahassee
	Tallahassee, I	FL 32314	2415 N. Monro	e Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Suffield Health and Wellness LLC

2023 SEP 18 AM 7: 12

	ny as it now appears on our records.) iability Company)		
ne Articles of Organization for this Limited Liability Company orida document number	were filed on 05/23/2023 and assigned		
nis amendment is submitted to amend the following:			
If amending name, enter the new name of the limited liab	ility company here:		
e new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" or the abbreviation "L.L.C."		
nter new principal offices address, if applicable:	11132 Zephyr Way Jacksonville, FL 32223		
rincipal office address MUST BE A STREET ADDRESS)			
nter new mailing address, if applicable:	11132 Zephyr Way Jacksonville, FL 32223		
Acilina address MAY DE A DOCT OFFICE DOV			
failing address MAY BE A POST OFFICE BOX)			
If amending the registered agent and/or registered office a			
If amending the registered agent and/or registered office agent and/or the new registered office address here: Name of New Registered Agent:			
If amending the registered agent and/or registered office agent and/or the new registered office address here: Name of New Registered Agent:	address on our records, <u>enter the name of the new reg</u>		

If Changing Registered Agent, Signature of New Registered Agent

f amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

1GR = Manager

MBR = Authorized Member

<u>`itle</u>	<u>Name</u>	Address	Type of Action
MGR ———	Angela Suffield	11132 Zephyr Way Jscksonville, FL 32223	∃ Add
			□ Remove
			Change
иGR 	Douglas Suffield	201 Island Harbor Circle Ponte Vedra Beach,	□Add
		FL 32082	Remove
			□Change
AMBR	Douglas Suffield	11132 Zephyr Way Jacksonville, FL 32223	■Add
			□Remove
			Change
			□Add
			Remove
			Change
			□ Add
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n effe	ve date, if other than the da ective date is listed, the date must be If the date inserted in this block ent's effective date on the Depar	especific and cannot be prior to does not meet the application.	r to date of filing or more the cable statutory filing req	an 90 days after filing.) Pursi	uant to 605.020' not be listed as
cord	d specifies a delayed effective da ed.	ate, but not an effective t	ime, at 12:01 a.m. on the	e earlier of: (b) The 90th	n day after the
cume cord	ed.		ime, at 12:01 a.m. on the	e earlier of: (b) The 90th	n day after the
cume ecord	September 8 /s/ Douglas Suffield	. 2023	·		n day after the
cume ecord	September 8 /s/ Douglas Suffield		·		n day after the