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DATE: 06/25/24

NAME: CLEWISTON NURSING AND REHAB OPCO LLC

TYPE OF FILING: AMENDMENT

COST: 25.00

RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA000000015

AUTHORIZATION: ABBIE/PAUL HODGE

COVER LETTER

TO:

	egistration Se livision of Cor			
eun ir ca	Clewiston N	Nursing and Rehab Opco LLC		
SUBJECT	· .	Name of Lim	ited Liability Company	
The enclos	sed Articles of .	Amendment and fee(s) are sub	mitted for filing.	
Please retu	ırn all correspo	ndence concerning this matter	to the following:	
			Name of Person	
			Firm/Company	
			Address	
			City/State and Zip Code	
For further	r information co	E-mail address: (to be used for future annual report no	tification)
			at () Area Code Dayti	
	Name o	l'Person	Area Code Dayti	me Telephone Number
Enclosed i	s a check for th	ne following amount:		
■ \$25.00	0 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	<u> Iailing Addres</u> Registration S		Street Address: Registration S	ection
Registration Section Division of Corporations		Division of Co		
	O. Box 632		The Centre of	Tallahassee
Ţ	allahassee, I	FL 32314	2415 N. Monr	oe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

TC)	
ARTICLES OF O	RGANIZATION	<i>3</i> ,
OI	3	The Contract of the Contract o

Clewiston Nursing and Rehab Opco LLC		\o`_`\\
(Name of the Limited Liability Compan (A Florida Limited Li	y as it now appears on our records ability Company)	and assigned
The Articles of Organization for this Limited Liability Company v	vere filed on 6/5/2023	and assigned
Florida document number L23000268320		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabil	ity company here:	
The new name must be distinguishable and contain the words "Limited Liability	ty 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)		
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abb 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)		
1. Hunning wantest part 1 DE 111 OST OTTTEE 120.10		
B. If amending the registered agent and/or registered office acagent and/or the new registered office address here:	ddress on our records, <u>enter t</u>	the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, Flo	rida Zip Code
No. D. Sanada America Cinnatana (Cabanaian Basistana) Aganta	•	·

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, 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>	<u>Address</u>	Type of Action
MGR	Shalom Friedland	211 Boulevard of the Americas	= Add
		Suite 209	
		Lakewood NJ 08701	
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Fective date, if other than the neffective date is listed, the date muste: If the date inserted in this blocument's effective date on the D	st be specific and ook does not me	cannot be prior	able statutory	or more than 90	(optiona days after filin nents, this day	g.) Pursuant to 60)5.0207 sted as
ecord specifies a delayed effectivis filed.	re date, but not a	in effective ti	me, at 12:01	a.m. on the ear	lier of: (b)	The 90th day aft	er the
ted June 25		2024	_ ·				

Filing Fee: \$25.00