

L23000335115

(Requestor's Name)

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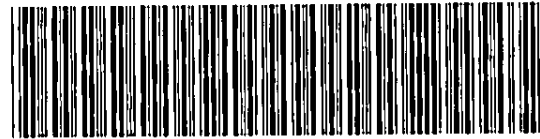
(Business Entity Name)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

R. HUNT

05/17/24

CT CORP
(850) 656-4724
3458 Lakesore Drive
Tallahassee, FL 32312

Date: 05/17/2024

Acc#I20160000072

en: c Dll

Name:	Bariendo Florida LLC
Document #:	
Order #:	15571413 - 1

Certified Copy of Arts & Amend:	<input type="checkbox"/>		
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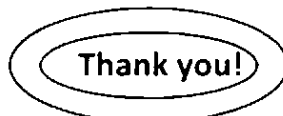
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Ref# _____

Amount: \$ **55.00**



COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Bariendo Florida LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Christopher Thompson, M.D.

Name of Person

Bariendo Florida PLLC

Firm/Company

155 Seaport Boulevard, c/o Mark Leonardo

Address

Boston, MA 02210

City/State and Zip Code

ccthompson@bariendofl.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Pichayut Jirapino

650 704-3901
at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the 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
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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

Bariendo Florida LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on July 14, 2023 and assigned
Florida document number L23000335115.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Bariatric Endoscopy PLLC

The new name must be distinguishable and contain the words "Limited Liability 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)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent: C T Corporation System

New Registered Office Address: 1200 South Pine Island Road

Enter Florida street address

Plantation, Florida 33324
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.

/s/ Olga Hinkel Olga Hinkel - Vice President

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>	<u>Type of Action</u>
AMBR	Christopher Thompson, M.D.	c/o Mark Leondardo, Nutter McClenen & Fish LLP	<input checked="" type="checkbox"/> Add
		155 Seaport Boulevard	<input type="checkbox"/> Remove
		Boston, MA 02210	<input type="checkbox"/> Change
AMBR	Pichayut Jirapino	382 NE 191st St #746698	<input type="checkbox"/> Add
		Miami, FL 3179	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

The purpose of this Professional Limited Liability Company is to engage in the practice of medicine.

17 FEB 74 12
FBI

7:42

E. Effective date, if other than the date of filing: _____ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated May 16, 2024

/s/ Christopher Thompson

Signature of a member or authorized representative of a member

Christopher Thompson, M.D., Authorized Member

Typed or printed name of signee