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COVER LETTER

TO: Registration Section Division of Corporations

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LAKE MARY INFUSION CENTER LLC

SUBJECT: ____

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:

HELENA BUKRITSKY

Name of Person

LAKE MARY INFUSION CENTER LLC

Firm/Company

105 COMMERCE ST, SUITE 109

Address

LAKE MARY, FL 32746

 City/State and Zip Code

 City/State and Zip Code

 DBRERN@GMAIL.COM

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

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

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

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

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Enclosed is a check for the following amount:

\$25.00 Filing Fee

\$30.00 Filing Fee & Certificate of Status S55.00 Filing Fee & Certified Copy (additional copy is enclosed) S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

<u>Mailing Address:</u> Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 <u>Street Address:</u> 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

LAKE MARY INFUSION CENTER 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 <u>JULY 24, 2023</u> and assigned Florida document number <u>L23000348444</u>.

This amendment is submitted to amend the following:

3

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

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC"

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, <u>enter the name of the new registered</u> <u>agent and/or the new registered office address here</u>:

Name of New Registered Agent:	Helena.	Buknutshy
New Registered Office Address:	105 Commen	
	UAKE Mary City	ida street address , FloridaZip 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, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
MGR	NADER HENRY	14001 CARLTON DR	■Add
		DAVIE, FL 33330	
	1) blatek.		🗆 Change
MGR	Heleng Bukintsky	241 Porchester Dr	🗆 Add
		SANFORD FL 3277	Remove
			Change
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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Effective date, if other than the d if an effective date is listed, the date must <u>Note:</u> If the date inserted in this bloc document's effective date on the Dep	ate of filing: be specific and cann ik does not meet t	he applicable statu	filing or more tory filing re	(option than 90 days after fil quirements, this d	ing.) Pursuant to 605.0207
e record specifies a delayed effective rd is filed.	date, but not an e	ffective time, at 12:	:01 a.m. on t	he earlier of: (b)	The 90th day after the
AUGUST IST Dated	$\frac{20}{1}$	23	1.		
<u>}</u>	Electronic of a memb	ser or authorized repri	<u>140</u>	1 member)

Helena Bulc Mtsty Typed or printed name of signee

Filing Fee: \$25.00