

L2300357529

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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WAIT

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MAIL

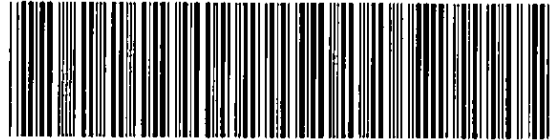
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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09/27/23--01011--010 **25.00

2023 SEP 27 AM 11:58

10/8/2023

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: MEDIGO 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:

ANDRES BELTRAN-FLETSCHER

Name of Person

MEDIGO LLC

Firm/Company

200 South Andrews Ave, Suite 504

Address

Fort Lauderdale, Florida 33301

City/State and Zip Code

afletscher@medigo.care

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

For further information concerning this matter, please call:

ANDRES BELTRAN-FLETSCHER 754 999-2963
Name of Person at () Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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

Florida Department of State
Division of Corporations
Corporate Filings
P.O. Box 6327
Tallahassee, FL 32314

Subject: Amendment of Manager and Business Address

Dear Sir/Madam,

I am writing to notify the Division of Corporations about significant amendments pertaining to the business entity registered under the document number L23000357529, legally named as MEDIGO LLC. These changes involve the updating of the Registered agent, manager name details and the official business address.

Enclosed, please find the completed [Amendment form, "Articles of Amendment to Articles of Organization" for LLCs] that outlines the changes in detail. The amendments are summarized as follows:

1. **Change of Manager:**

- Previous Manager: Carlos A. Vanegas
- New Manager: Andres Beltran-Fletscher

2. **Change of Business Address:**

- Previous Address: 20200 West Dixie Highway Suite 902, Aventura, Florida 33180
- New Address: 200 South Andrews Ave Suite 504, Fort Lauderdale, Florida 33301

3. **Change of Registered Agent:**

- Previous Registered Agent: Carlos A. Vanegas
- New Registered Agent: Andres Beltran-Fletscher

I request that the records of the Division of Corporations be updated accordingly to reflect these changes. The applicable filing fee, as per the guidelines provided on the Sunbiz website, is included with this submission.

We are committed to maintaining compliance with the State of Florida's regulations and appreciate your assistance in facilitating these updates. I am available for any further information or clarification you may require processing these amendments. You can reach me at the above-mentioned phone number or email address.

Thank you for your attention to this matter. We anticipate your prompt processing of these changes to ensure our business records are current and accurate.

Sincerely,


Andres Beltran-Fletscher
Manager
Medigo LLC
754-999-2963

Enclosures: Amendment form and Filing Fee

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

MEDIGO LLC

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

2023 SEP 27 AM 11:58

The Articles of Organization for this Limited Liability Company were filed on JULY 31, 2023 and assigned
Florida document number L23000357529.

This amendment is submitted to amend the following:

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 "L.L.C." or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

200 SOUTH ANDREWS AVE

SUITE 504

FORT LAUDERDALE, FLORIDA 33301

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

200 SOUTH ANDREWS AVE

SUITE 504

FORT LAUDERDALE, FLORIDA 33301

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:

ANDRES BELTRAN-FLETSCHER

New Registered Office Address:

200 SOUTH ANDREWS AVE SUITE 504

Enter Florida street address

FORT LAUDERDALE

City

Florida 33301

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.


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


[illegible]

[illegible]

(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)

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.

SEPTEMBER 21 2023



Signature of a member or authorized representative of a member

ANDRES BELTRAN-FLETSCHER

Typed or printed name of signee

Filing Fee: \$25.00