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COVER LETTER

TO:

Registration Section **Division of Corporations**

SUBJECT: PHH Care 2LC	
Name of Limited Liability Co	ompany
The enclosed Articles of Amendment and fee(s) are submitted for filir	ાદુ.
Please return all correspondence concerning this matter to the following	<u>រេឌ:</u>
Licras Fave	Ceall
Gregg Fave	Person
Firm/Ce	mpany
,	
1501 30 ^{+ h}	SF. 60,
Bradenton,	FL 34205
City/State an	d Zip Code
E-mail address: (to be used for fi	ture annual report notification)
For further information concerning this matter, please call:	
<u>-</u>	
Name of Person at (9)	41, 465-3708
Name of Person Are	a Code Daytime Telephone Number
Enclosed is a check for the following amount:	
	Filing Fee & S60.00 Filing Fee, ed Copy Certificate of Status &
	al copy is enclosed) Certified Copy
	(additional copy is enclosed)
Mailing Address:	Street Address:
Registration Section	Registration Section
Division of Corporations P.O. Box 6327	Division of Corporations The Centre of Tallahassee
Tallahassee, FL 32314	The Centre of Tallahassee 2415 N. Monroe Street, Suite 818 ECEIVED Tallahassee FL 32303 SEP 0 5 2023
	Tallahassee FL 32303 SEP U 5 LOLD

Tallahassee, FL 32303

SEP 0 5 2023

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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ity company	<u>here</u> :	
y Company," the	e designation "Ll	.C" or the abbreviation "L.L.C."
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ldress on our	records, <u>ent</u>	er the name of the new reg
Enter F	lorida street addi	ess
		Florida
City		Zip Code
erfor <mark>mance</mark> ovided for in	of my duties, 1 Chapter 605	further agree to comply wi and I am familiar with and i, F.S. Or, if this document that the limited liability
	Enter F	Enter Florida street addi

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
		News	□Add
			□Remove
			□Remove
			Change
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ri amen	ding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	Prase revitore charme company III as
	title AMBR from PHH Care LCC,
	Please removed Charlie Company LCC as title AMBR from PHH Care LCC, so that only Gregg G. Favereau is the sole AMBR for PHH Care LCC,
	the sole AMBR for PHH Care LLC.
_	
_	
_	
	
	e date, if other than the date of filing:
Note: If	the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as
rocuncii	t's effective date on the Department of State's records.
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
d is fil e d	
	4,00 1 902
Dated	5ept 1. 3023.
	1 July from
	Signature of a member or authorized representative of a member
	Signature of a member or authorized representative of a member Grege Favereau Typed or printed name of signee

Filing Fee: \$25.00