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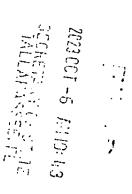
(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





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10/08/23--01025--001 **25.00



COVER LETTER

Division of Corporations		
SUBJECT: M&S Medical Mana of Limited Li		_
Dear Sir or Madam:		
The enclosed Statement of Correction and fee(s) are submitted for fil	ing.	
Please return all correspondence concerning this matter to the follow	ing:	
Dervick Taylva 5 Name of Person		
Firm/Company	_	
Address City/State and Zip Code OTOLL PCS O MICH PULL SUPPLEM. E-mail address: (to be used for future annual report notification	id Rd Ste 130 - Cum	2023 OCT - 5 / / / / / / / / / / / / / / / / / /
For further information concerning this matter, please call:		
Derrick Tavevas at (UD) Name of Person at (UD) Area Cod	de Daytime Telephone Number	_
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 Tallahassee, FL 32303	e 810

□\$55 Filing Fee &

Certified Copy

☐ \$60 Filing Fee,

Certificate of Status & Certified Copy

\$25 Filing Fee

Enclosed is a check for the following amount:

□ \$30 Filing Fee &

Certificate of Status

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

M 25 Med 1	cal Hanagar	nort ICC	_	
(Name of the Limited Liability (A Florida	y Company as it now appears on Limited Liability Company)	our records.)		
The Articles of Organization for this Limited Liability Co	ompany were filed on	12/23	_ and assigne	ed
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limit	ted liability company here:			
·				
The new name must be distinguishable and contain the words "Limi	ted Liability Company," the design	ation "LLC" or the abbre-	viation "L.L.C.	**
Enter new principal offices address, if applicable:	******			
Principal office address MUST BE A STREET ADDR	ESS)		.	
			- 2	
		200	723 C	~
Enter new mailing address, if applicable:			<u> </u>	<u>;</u>
Mailing address MAY BE A POST OFFICE BOX)				·
		• • • • • • • • • • • • • • • • • •	;	·
		(1100	3	,
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	office address on our recor	ds, enter the name o	<u>f the new re</u> ယ	gistere
Name of New Popintary Assets				
Name of New Registered Agent:				
New Registered Office Address:				
	Enter Florida s	treet address		
 	City	, Florida	Zip Code	
	Cuy		rsp 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>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	Derrick Taveras		<u> </u>
		Remar CEO Title	Remove
		 	
			□Add
			□Remove
			□Change
			20 Add CC T □ Remove
		70, 70, 73, 73,	□ Change □ □ Add
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ective date, if other than the date of filing: effective date is listed, the date must be specific and cannot be prior to date of filing	(optional) g or more than 90 days after filing.) Pursu	ant to 605.020
e: If the date inserted in this block does not meet the applicable statutory ument's effective date on the Department of State's records.		
cord specifies a delayed effective date, but not an effective time, at 12:01 as filed.	a.m. on the earlier of: (b) The 90th	day after the
$\operatorname{cd} \frac{10}{1} \frac{173}{73}, \dots$		