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Division of Corporations

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From:

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Email Address: Jmbunkley1@gmail.com

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN PSYCHPARTNERS, LLC

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

PsychPartners, LLC			
( <u>Name of the Limited Liability Compa</u> (A Florida Limited	iny as it now appears of Liability Company)	our records.)	<del></del>
The Articles of Organization for this Limited Liability Company Florida document number <u>L24000024118</u>	were filed on Januar	y 10, 2024	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	ility company here:		
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the desig	nation "LLC" or the abbrev	iation "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)			2024
	<del></del>		
		AHAS	2
Enter new mailing address, if applicable:		<del>ਾਰ ਹੈ ਹੈ</del>	3 11
(Mailing address MAY BE A POST OFFICE BON)		<u> </u>	- <u>5</u> - <u>C</u> -
	c		<u>3</u>
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	address on our reco	rds, <u>enter the name of</u>	the new registere
Name of New Registered Agent:			
New Registered Office Address:			***************************************
	Enter Florida	street address	
	City	, Florida 2	ip Code
New Registered Agent's Signature, if changing Registered Agent:	•		•
I hereby accept the appointment as registered agent and agreprovisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as public being filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my provided for in Cha	duties, and I am fami pter 605, F.S. Or, if th	liar with and is document is
If Char	iging Registered Agent,	Signature of New Register	ed Agent

02/02/2024 10:47 From:17184082550 To:18506176383 Date Time 02/02/24 10:47AM Pages: 4 P: 3/4 (((H240000454703)))

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

Title	Name	Address	Type of Action
MGR John M Bunkiey	John M Bunkiey	9227 Tillinghast Drive	——————————————————————————————————————
		Tampa, FL 33626	□Remove
			□ Change
		🗀 Add	
		⊡Remove	
	<del></del>	①Change	
			□Add
	<del></del>	□Remove	
		□Change	
<del></del>			□Add
		<del></del>	□Remove
		□Change	
		□Add	
	<del></del>	□Remove	
			□Change
		🗀 Add	
		<del></del>	□Remove
( ( (H240000	45470 3)))		Change

(((H24000045470.3)))

John M Bunkley

Filing Fee: \$25.00

Typed or printed name of signee