Note: Please print has page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To: Division of Corporations Fax Number : (850)617-6383 From: Account Name : EXPRESS CORPORATE FILING SERVICE INC. Account Number : 120000000146 Phone : (305)444-4994 Fax Number : (305)328-4774 MEnter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.** annual report mailings. Enter only one email address please.** LLC AMND/RESTATE/CORRECT OR M/MG RESIGN LOYALTY MEDICAL CENTER LLC

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JUL 3 1 2024

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

From Yanet Avila

LOYALTY MEDICAL CENTER					
(Name of the Lim	ited Liability Compa (A Florida Limited	any as it now appears on our records.) Liability Company)			
The Articles of Organization for this Limited I Florida document number <u>L24000</u> 080157	Liability Company	were filed on 92/16/2024	and	assign	ed
This amendment is submitted to amend the fol	lowing:				
A. If amending name, enter the new name	of the limited ligh	oility company here;			
The new name inust be distinguishable and contain the	words "Limited Liabi	thty Company," the designation "LLC" or the	abbreviation	L.L.C.	."
Enter new principal offices address, if applicable:		2977 GOODLETTE FRANK ROAD STE 13			
(Principal office address MUST BE A STRE)		NAPLES, FL 34103			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		2977 GOODLETTE FRANK ROAD	STE 13		 -
		NAPLES, FL 34103			
				2024	
B. If amending the registered agent and/or agent and/or the new registered office address.		address on our records, <u>enter the na</u>	ame of the	30 30 <u>10</u>	egis ter ec
Name of New Registered Agent: CHANGE OF		ADDRESS	<u> </u>	7	
New Registered Office Address:	2977 GOODLETTE FRANK ROAD STE 13		XTX	ယ္	
The second secon		Enter Florida sirvet address	H	8	
	NAPLES	, Florida	34103		
	City	Zip Co	K/e		

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.

To: Page: 4 of 5 2024-07-30 18 47 08 GNIT 13053284774 From Manet Avila

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
AMBR	CHANGE OF ADDRESS	2977 GOODLETTE FRANK ROAD STE 13	
		NAPLES, FL 34103	□Remove
		100	≣Change
AMBR	CHANGE OF ADDRESS	2977 GOODLETTE FRANK ROAD STE 13	Dadd
		NAPLES, FL 34103	
			⊞ Change
			:DAdd
			DRemove
			CIAdd
		-	©Remove
			TChange
		45-11-11-11-11-11-11-11-11-11-11-11-11-11	
			DRemove
			DChange
			□Remove
			©Change

					
					<u> </u>
					
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Effec	tive date, if other than the date flective date is listed, the date must be spi	of filing:	· · · · · · · · · · · · · · · · · · ·	(optional)	
Hanel Note:	flective date is listed, the date axist be spi If the date inserted in this block do	ecific and cannot be process not micel the aur	rior to date of filing or more th disable statutory filing rea	ian 90 davs after filing.) Pursuant (aurements) this date will not b	io 605.0207 c Hstarfias
docur	nent's effective date on the Departm	ient of State's reco:	rds.	and will hot o	e mada as
rd is f	rd specifies a delayed effective date, filed.			e earlier of: (b) The 90th day	after the
	1131 V 20	202 *			
Dated	JULY 30	- ' ' ' ' ' ' ' ' ' ' '			
		Υ.	J. V.		

Typed or printed name of signee