

L24000092602

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

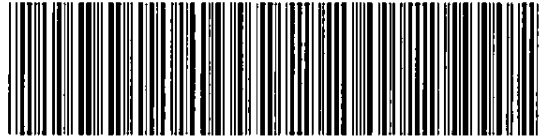
(Business Entity Name)

(Document Number)

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03/25/24--01027--012 **25.00

4/8/24
K.H.

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2024 MAR 25 AM 10:01

SECRETARY OF STATE
TALLAHASSEE, FL

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: HealthSurge Media 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:

Lawrence Kim

Name of Person

HealthSurge Media LLC

Firm/Company

18 N Jefferson Ave

Address

Clearwater, FL 33755

City/State and Zip Code

thelawkim@proton.me

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

For further information concerning this matter, please call:

Lawrence Kim

at (727) 743-7411

Name of Person

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

SECTION OF STATE
TALLAHASSEE, FL

2024 MAR 25 AM 10:01

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

HealthSurge Media **LLC**

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

The Articles of Organization for this Limited Liability Company were filed on 02/22/24 and assigned
Florida document number L24000092602.

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

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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: Registered Agents Inc

New Registered Office Address: 7901 4th St N STE 300

Enter Florida street address

St. Petersburg Florida 33702
City 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.

David Roberts

If Changing Registered Agent, Signature of New Registered Agent

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2024 MAR 25 AM 10:01
TALLAHASSEE, FL
STATE

MGR = Manager
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Charles Gifford	7901 4th St N	<input checked="" type="checkbox"/> Add
		St. Petersburg, FL 33702	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Zachary Traylor	7901 4th St N	<input checked="" type="checkbox"/> Add
		St. Petersburg, FL 33702	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

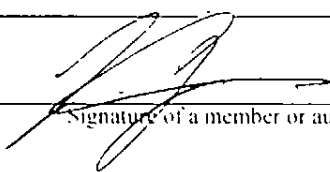
E. Effective date, if other than the date of filing: _____ (optional)

(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)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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.

Dated March 20 2024



Signature of a member or authorized representative of a member

Lawrence Kim

Typed or printed name of signee

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2024 MAR 25 AM 10:01
SEC. OF STATE
TALLAHASSEE, FL