

L24 0000 95988

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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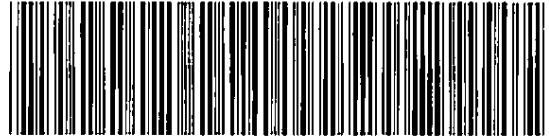
(Business Entity Name)

(Document Number)

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2024 MAY 29 AM 11:22
SECRETARY OF STATE
TALLAHASSEE FL

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SBS ADVOCATES, 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:

John C. Barnoski, Esquire

Name of Person

Monzo Catanese DeLollis, PC

Firm/Company

211 Bayberry Drive, Suite 2A

Address

Cape May Court House, NJ 08210

City/State and Zip Code

jbarnoski@connectonehealth.com

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

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TALLAHASSEE, FL

For further information concerning this matter, please call:

John C. Barnoski, Esquire

609 463-4601
at (_____) _____

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &
Certificate of Status

☐ \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$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

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

SBS ADVOCATES, 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 February 23, 2024 and assigned Florida document number L24000095988.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

N/A

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)

92840 Shipton Lane

Fernandia Beach, FL 32034

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

92840 Shipton Lane

Fernandina Beach, FL 32034

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:

Sean Clayton

New Registered Office Address:

92840 Shipton Lane

Enter Florida street address

Fernandina Beach

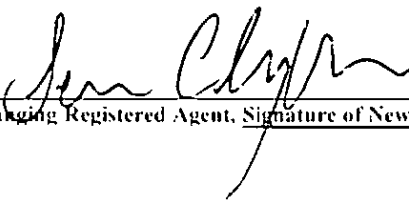
Florida 32034

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.


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>	<u>Type of Action</u>
MGR	BRAVELL DODD H	4013 Sunrise Farms Road	<input type="checkbox"/> Add
		Middleburg, FL 32068	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	SEAN CLAYTON	TRUTH ELEVEN, LLC	<input checked="" type="checkbox"/> Add
		92840 Shipton Lane	<input type="checkbox"/> Remove
		Fernandia Beach, FL 32034	<input type="checkbox"/> Change
AMBR	SEAN CLAYTON	TRUTH ELEVEN, LLC	<input checked="" type="checkbox"/> Add
		92840 Shipton Lane	<input type="checkbox"/> Remove
		Fernandia Beach, FL 32034	<input type="checkbox"/> Change
AMBR	JOSHUA BERG	LONGEVITY HEALTH, LLC	<input checked="" type="checkbox"/> Add
		884 Garden Court	<input type="checkbox"/> Remove
		Plantation, FL 33317	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change


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2021 MAY 29 AM 11:22
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TALLAHASSEE, FL

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2024 MAY 29 PM 11:22
SECRETARY OF STATE
TALLAHASSEE, FL

(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)

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.


Signature of a member or authorized representative of a member

John C. Barnoski, Esquire
Typed or printed name of signee

Filing Fee: \$25.00