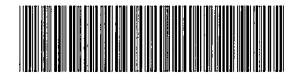
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(Re	questor's Name)	
(Ad	ldress)	
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(Cit	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
<u> </u>		

Office Use Only



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03/18/24--01022--008 **25.00



COVER LETTER

TO: Registration Se Division of Con			
SPATTAN			
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sul	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	SANJAY PATTANI		
	•	Name of Person	
	SPATTANIMD LLC		
		Firm/Company	
	12450 LAKE BUTLER B	OULEVARD	
		Address	
	WINDERMERE, FL 3478	66	
		City/State and Zip Code	
	elitemednow@gmail.com	to be used for future annual report notificati	ion)
For further information of	oncerning this matter, please c	-	,
SANJAY PATTANI		443 762-6108	
Name o	f Person	Area Code Daytime Tel	lephone Number
Enclosed is a check for the	ne following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
<u>Mailing Addres</u> Registration S		Street Address: Registration Sectio	п
Division of C		Division of Corpor	

P.O. Box 6327 Tallahassee, FL 32314 The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SPATTANIMD LLC				
(Name of the Limi	ted Liability Compa (A Florida Limited l	ny as it now appears or liability Company)	our records.)	
The Articles of Organization for this Limited L. Florida document number 1.24000104843	iability Company	were filed on 03/01	/2024	and assigned
This amendment is submitted to amend the foll	owing:			
A. If amending name, enter the new name of	f the limited liab	ility company here:		
The new name must be distinguishable and contain the v	vords "Limited Liabi	lity Company," the desig	nation "LLC" or the abbrevi	ation "L.L.C."
Enter new principal offices address, if applicable:		9300 Windermere Rd #1392		
(Principal office address MUST BE A STREET ADDRESS)		Windermere, FL 3-	1786	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		9300 Windermere FL 3		
B. If amending the registered agent and/or agent and/or the new registered office addre		address on our reco	rds, enter the name of	the new regist
Name of New Registered Agent:	XEL ADVISORS INC			
New Registered Office Address:	6965 Piazza Gr	rande Ave Suite 214 Enter Florida	street address	
	Orlando		Florida 32835	
		City		ip 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>	Name	<u>Address</u>	Type of Action
			□Add
			□Remove
			□∧dd
			□Change
			□Add
			□Remove
			□Change `
	 		
			□Remove
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Effective date, if other than the fan effective date is listed, the date must Note: If the date inserted in this blo locument's effective date on the De	ck does not mee	et the applicable :	e of filing or more t statutory filing re	(optiona han 90 days after filin quirements, this dal	l) g.) Pursuant to 605.02 e will not be listed
record specifies a delayed effective d is filed.	date, but not ar	effective time, a	it 12:01 a.m. on t	ne earlier of: (b) 1	The 90th day after th
Dated MARCH II	,	2024			
	Tell 1	·	- ;		
-					

Filing Fee: \$25.00