L24000 131765

(Re	equestor's Name)	
(Ac	ddress)	<u> </u>
(Ac	ddress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	
	J. HOR	INE
	J. HOR SEP 10	2024





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7024 SEP -4 PH 12: 43

COVER LETTER

Division of Corpo	prations		
SUBJECT:	ive Well DPC	· <u>LLC</u> ited Liability Company	
30B3EC1	Name of Lim	ited Liability Company	
The enclosed Articles of Ar	nendment and fee(s) are sub	mitted for filing.	
Please return all correspond	lence concerning this matter	to the following:	
	Julie	Dooley Name of Person	
	Live U	Uell DPC LLC Firm/Company	
		Tuttle ave Address	
	Saraso	ta F/ 3423 9 City/State and Zip Code	
	dooley a E-mail address: (Live wellsrg. com to be used for future and all report notif	ication)
For further information con	cerning this matter, please ca		
Julie Name of P	Dooley erson	at (<u>94/</u>) <u>96/-</u> Area Code Daytime	464/ or 94/-529-7770 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)
<u>Mailing Address:</u>		Street Address:	

TO:

Registration Section

Registration Section
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

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

ARTIC	CLES OF ORGA	ANIZATION	\mathcal{F}_{L}
	OF		2024 SED
Liv	e Well DPC Liability Company as it Florida Limited Liability	2, LLC	2024 SEP - 4 PH 12: 1,3
(<u>Name of the Limited</u> (A	Liability Company as it Florida Limited Liability	Company)	- 177 <i>8</i> 77
The Articles of Organization for this Limited Liab	oility Company were t	iled on <i>3//.</i>	8/2024 and assigned
Florida document number	765	,	•
This amendment is submitted to amend the follow	ving:		
A. If amending name, enter the new name of t	he limited liability co	mpany here:	
The new name must be distinguishable and contain the wor	ds "Limited Liability Con	pany," the designation	"LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicat	ole:		
(Principal office address MUST BE A STREET	ADDRESS)		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BO	<u> </u>		
			
B. If amending the registered agent and/or reg agent and/or the new registered office address		s on our records, g	enter the name of the new registered
Name of New Registered Agent:		lic A. Dooley	
New Registered Office Address:	1528	S. TuHle Enter Florida street	address
	Sarasa	La	Florida <u> </u>
	<u>Sarasa</u> Ci	<u>ta</u>	_, Florida <u> </u>

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 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>	Address	Type of Action
			□ Add
			□Remove
			☐ Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			☐ Change
			□ Add
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an effective	late, if other than the date of filing:	5.020
	e date inserted in this block does not meet the applicable statutory filing requirements, this date will not be list seffective date on the Department of State's records.	tea a:
record spe	ecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after	er the
	August 294 . 2024.	
	August 29th. 2024.	
d is filed. Dated	Signature of a member or authorized representative of a member Tulie A Dooley Typed or printed name of signee	

COVER LETTER

TO: Registration Section

Tallahassee, FL 32314

Division of Cor	porations		
SUBJECT:	ive Well DPC Name of Lim	· LLC	
	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	Julia	Dooley	
		Dooley Name of Person	·
	/:/	1111 200 110	
	LIVE U	Vell DPC LLC Firm/Company	
	,		
		Tuttle ave	<u></u>
	0	, 144.55	
	Saraso	ta F/ 34239 City/State and Zip Code	<u> </u>
		City/State and Zip Code	
	E-mail address: (live wellsrg.com to be used for future anabal report not	ification)
For further information co	oncerning this matter, please ca		
1 1.		0.44	
Name of	1)00/ey	at (94/) 96/ Area Code Daytin	<u>- 46 4/ or 94/</u> -529-7770 ne Telephone Number
	, , , , , , , , , , , , , , , , , , , ,	The code Dayin.	ne reseptione rigitizet
Enclosed is a check for th	e following amount:		
□ \$25.00 Filing Fee	☐ \$30.00 Filing Fee &	□ \$55.00 Filing Fee &	W 560 00 Eiling Fra
1 325.00 Filling Fee	Certificate of Status	Certified Copy	\$60.00 Filing Fee, Certificate of Status &
		(additional copy is enclosed)	Certified Copy (additional copy is enclosed)
\$# · th:		0	
<u>Mailing Address</u> Registration S	_	<u>Street Address:</u> Registration Se	ection
Division of Co	orporations	Division of Co	rporations
P.O. Box 632	7	The Centre of	Tallahassee Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

AKII	CLES OF ORGANIZATION	$\sim -\mathcal{E}_L$
	OF	1024 SED
		οςρ 4 n
Liv	12 Well DPC, LLC	2024 SEP - 4 PM 12: 44
(Name of the Limiter	d Liability Company as it now appears on our re A Florida Limited Liability Company)	cords.)
		1850
The Articles of Organization for this Limited Lia	ibility Company were filed on $\frac{3//8}{}$	12024 and assigned
Florida document number		
This amendment is submitted to amend the follow	wing:	
A. If amending name, enter the new name of	the limited liability company here:	
The new name must be distinguishable and contain the wo	ords "Limited Liability Company," the designation "	LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applica	ble:	
Principal office address MUST BE A STREET	ADDRESS)	
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE B	uov)	
Muning address MAT BL AT OST OF TEL B		
	 	
B. If amending the registered agent and/or re	gistored office address on our records or	stor the name of the new registered
gent and/or the new registered office address		ter the name of the new registered
Name of New Registered Agent:	Julia A Donlay	
Name of New Registered Agent.	Janes Doored	
New Registered Office Address:	1528 S. Tuttle	avenue
	Sarasota	, Florida <u>34239</u> Zip Code
	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 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>	Address	Type of Action
			□Add
			□Remove
			□ Change
			□Add
			□ Remove
			□Change
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			□Remove
			□ Change

 	
	
	
-	
(If an effection Note: If	e date, if other than the date of filing:(optional) ive 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 the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as it's effective date on the Department of State's records.
	because due on the department of Blace of Focologies.
ord is filed	
	Queunt 294 2024
Dated	<u> </u>
Dated	Quil: 4 Q/
Dated	Signature of a member or authorized representative of a member Tulic A Dooley Typed or printed name of signce