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COVER LETTER

TO: Registration Se Division of Cor					
	SICAL THERAPY AND SPO	RTS PERFORMANCE LLC			
SUBJECT:Name of Limited Liability Company					
	Amendment and fee(s) are sub-				
	Matthew Hammaker				
	<u></u>	Name of Person			
	APEX PHYSICAL THER	APY AND SPORTS PERFORMANCE	LLC		
		Firm/Company			
	529 Piazza Pt				
		Address			
	Oviedo, Fl 32765				
		City/State and Zip Code			
	hammakermatt391@gmail.c		202		
		to be used for future annual report notificati	(iii)		
For further information c	concerning this matter, please co		· · · · · · · · · · · · · · · · · · ·		
Matthew Hammaker		770 235-0135 at ()	7		
Name o	of Person	Area Code Daytime Te	ephone Number PN 4: 45		
Enclosed is a check for the	he following amount:		,; 5 5		
S25.00 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 !		Street Address: Registration Section	n		

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

APEX PHYSICAL THERAPY AND SPORTS PERF		
(Name of the Limited Liability Compa (A Florida Limited)	ny as it now appears on our records.) Jability Company)	
The Articles of Organization for this Limited Liability Company	were filed on March 18, 2024	and assigned
Florida document number 1.24000132696.		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
APEX PHYSICAL THERAPY & SPORTS PERFORMANCE LLC		
The new name must be distinguishable and contain the words "Limited Liabi	lity 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)		21 F
		55
Enter new mailing address, if applicable:		10° - 11
(Mailing address MAY BE A POST OFFICE BOX)		<u> </u>
praining duaress SIAT BE AT OST OFFICE BOA		
		
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>enter the</u>	name of the new register
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	. Florid	:1
	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>	Address	Type of Action
AMBR	Matthew Hammaker	529 Piazza Pt	□Add
		Oviedo, Fl 32756	□Remove
			■Change
AMBR	Jason Bizjack	529 Piazza Pt	□Add
		Oviedo, Fl 32765	Remove
			(I) Change
			□ / 1021
			□ Add 221 □ Richove
			O) Change T
			☐Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□ Change

				-	
1) Name change from "APEX PI		ND SPORTS PERI	FORMANCE" to		
"APEX PHYSICAL THERAPY	& SPORTS PERFORM	ANCE"			
		_			
2) Both members, Jason Bizjack	and Matthew Hammake	r, are changing from	n Mangers (MGR) to	<u>-</u>	
Authorized Members (AMBR)				_	
				_	
					
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	<u></u>				2021
				;	2024 MAY
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ffective date, if other than the da an effective date is listed, the date must be tote: If the date inserted in this block ocument's effective date on the Depa	specific and cannot be prior does not meet the application.	r to date of filing or me	ore than 90 days after fil g requirements, this d	ing.) Pursuant	t to 605.020 be fisted a
record specifies a delayed effective d Listifled.	ite, but not an effective t	time, at 12:01 a.m. o	on the earlier of: (b)	The 90th da	ay after the
ated	. 2024	·			
Matthew Hammaker					
	mature of a member or auth		at a marshar		

Filing Fee: \$25.00