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To:

Division of Corporations

Fax Number : (850)617-6383

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (614)280-3338 Fax Number : (614)573-3996

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.**

ভিত্ৰ ভিত্ৰ Email Address:

LLCAMND/RESTATE/CORRECT OR M/MG RESIGN FLORIDA ASC HOLDINGS, LLC

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THeFPMIEUX MAY 29 2024

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	ARTICLE	5 OF ORGANIZATION	
		OF	
		9	
ė,	Florida ASC Holdings, LLC		3
	(Name of the Limited Liabil (A Florid	ity Company as it now appears on our records.) a Limited Liability Company)	
The Articles	s of Organization for this Limited Liability (Company were filed on May 22, 2024	and assigned
Florida doct	ument number 1.24000227409	·	
This amend	ment is submitted to amend the following:		
A. Ifamen	ding name, enter the new name of the lin	nited liability company here:	
Nationwide	ASC Holdings, LLC		
The new name	must be distinguishable and contain the words "Lir	nited Liability Company," the designation "LLC" or th	e abbreviation "L.L.C."
Enter new	principal offices address, if applicable:		
(Principal o	office address MUST BE A STREET ADD	RESS)	
			4
			16.23 23
Enter new	mailing address, if applicable:		
(Mailing ad	Idress MAY BE A POST OFFICE BOX)		N
			177 36
B. If amen	ding the registered agent and/or registere	d office address on our records, enter the n	ame of the new registered
agent and/o	or the new registered office address here:		7E
<u>Na</u>	ume of New Registered Agent:		
<u>Ne</u>	w Registered Office Address:		
		Enter Florida street address	
		. Florida	
		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.

From: James Tanks

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	Address	Type of Action
		1	□Add
			□Remove
			ClChange
			□Add
			□Change
			□Add
			□Remove
			☐ Change
			Remove
			☐ Change
			□Remove
·			
			□Remove
			(T)Change

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Typed or printed name of signee