## 124000259633

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(Oky/State/Zip/Prione #)
PICK-UP WAIT MAIL
(Business Entity Name)
, , ,
(Document Number)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filling Officer
Special Instructions to Filing Officer:
7/4

Office Use Only



100439045061

11/05/24--01026--012 \*\*52.50



JAN 1 7 2223 D CUSHING The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

	Jean H. Vincent		_
		Name of Person	<del></del>
	Saving Lives Medical, LLC		
		Firm/Company	
,	5758 21st Ave W, Suite A		
		Address	
	Bradenton, Fl 34209		
		City/State and Zip Code	
	Jehivincentl@gmail.com		
	E-mail address: (to	be used for future annual report notification)	
For further information co	oncerning this matter, please cal	1:	
Jean H. Vincent		201 660 5943	
Name o	f Person	Area Code Daytime Telepho	one Number
Enclosed is a check for the	ne following amount:		
□ \$25.00 Filing Fce	S30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee &  Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addre Registration Division of O P.O. Box 63 Tallahassee,	Section Corporations 27	Street Address: Registration Section Division of Corporation The Centre of Tallaha 2415 N. Monroe Street Tallahassee, FL 3230	et, Suite 810



January 8, 2025

JEAN H VINCENT 5758 21ST AVE W. A BRADENTON, FL 34209

SUBJECT: SAVING LIVES MEDICAL, LLC

Ref. Number: L24000259633

We have received your document for SAVING LIVES MEDICAL, LLC and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a Corporation, but your entity is a Limited Liability Company. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 825A00000581

Diane Cushing Operations Manager A

www.sunbiz.org

Saving Lives Medical, 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	y Company	were filed on Jun	e 6, 2024	and assigned
Florida document number L24000259633	<del></del> -			
This amendment is submitted to amend the following	<b>;</b> :		•	
A. If amending name, enter the new name of the l	imited liab	ility company her	<u>re</u> :	
N/A				
The new name must be distinguishable and contain the words	Limited Liabil	lity Company," the de	esignation "LLC" or the al	obreviation "L.L.C."
Enter new principal offices address, if applicable:  (Principal office address MUST BE A STREET ADDRESS)		N/A		
		N/A		
		N/A		1-2
			: 🚶	
Enter new mailing address, if applicable:		N/A		
(Mailing address MAY BE A POST OFFICE BOX)		N/A	•••	2
		N/A	;;	
			•	10 Co
B. If amending the registered agent and/or registeragent and/or the new registered office address her		address on our re	cords, <u>enter the nan</u>	ne of the new registered
agent analor the new registered office address ner	<u>z</u> .		·	100
Name of New Registered Agent: N/A	A			
New Registered Office Address: N/	A			
		Enter Flori	ida street address	
	, Florida			
		City		Zip Code
New Registered Agent's Signature, if changing Register	ered Agent:			
I hereby accept the appointment as registered age provisions of all statutes relative to the proper and accept the obligations of my position as registered being filed to merely reflect a change in the regist company has been notified in writing of this chang	d complete d agent as p ered office	performance of i provided for in C	my duties, and I am hapter 605, F.S. Or,	familiar with and if this document is

If Changing Registered Agent, Signature of New Registered Agent

Title	Name	5857 21st Ave W Suite A, Bradenton Fl 34209	<del>-</del>
AMBR	Jean H. Vincent	3837 218t Ave W 3dde 711 3dd	<b>=</b> Add
<del></del>			□Remove
AMBR	Jovinsky Eliscard	17031 Peaceful Valley Dr. Wimauma Fl 33598	≣Add
<del> </del>			□Remove
AMBR	Jonathas Petit	1019 Lacey Lane, Tallahassee Fl 32304	<b>≣</b> Add
<u> </u>			□Remove
			[] Change
MGR Raymonde Vernet	Raymonde Vernet	3060 NE 11th Ave. Pompano Beach Fl 33064	<b>=</b> Add
			□Remove
			🗖 Add
			□Remov
			Change
			□Add
			□Remo
			□Chang

• .	Article V: The name of the Person authorized to manage the LLC is: Title: Director
-	Name: Raymonde Vernet
-	Address: 3060 NE 11th Ave, Pompano Fl 33064
<del>-</del>	Article VI: The effective date for this limited Liability Company shall be: October 28, 2024
-	
-	
-	
-	· · · · · · · · · · · · · · · · · · ·
-	
-	
-	
-	
-	
-	
-	
-	
(If an eff <u>Note:</u>	October 28, 2024  (optional)  ective date, if other than the date of filing:  (optional)  ective 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 date inserted in this block does not mee: the applicable statutory filing requirements, this date will not be listed as the tent's effective date on the Department of State's records.
If the recor	d 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 led.
Dated	12/30/2024 Florida
Dated	The state of the s
	Signature of a member or authorized representative of a member
	Jean H. Vincent
	Typed or printed name of signee

Filing Fee: \$25.00