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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	\ \ \
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FILLL 2024 NOV -8 PM 3: 31 SECRETARY OF STATE TALLAHASSEE, FL

COVER LETTER

	egistration Sec ivision of Corp					
SHD IECT		L DIRECT PRIMARY CARE	ELLC			
SUBJECT	·	Name of Lim	ited Liability Company			
The enclos	sed Articles of A	Amendment and fee(s) are sub	mitted for filing.			
Please retu	ırn all correspoi	ndence concerning this matter	to the following:			
		THOMASINA JAMES				
			Name of Person			
		EverWell H	eaith & Wellness			
		+ 1001 NW 62 STREET, SU	Firm/Company JITE 320A			
			Address			
		FORT LAUDERDALE, F	L 33309		σ 2	
		CONTACT@EVERWELL	City/State and Zip Code DPC.COM		2024 NOV -8 PM 3: 31 SECRETARY OF STATE TALLAHASSEE, FU	••
		E-mail address: (to be used for future annual report notific	ation)	78.HAX ASIMA 8-1	
For further	information co	oncerning this matter, please c	all:		SSE SSE	į
THOMAS	SINA JAMES		786 379-4300 at ()		3: 31 STATE E. FU	•
	Name of	Person	Area Code Daytime T	Telephone Number	— Ħ <i>-</i>	
Enclosed i	s a check for th	e following amount:				
■ \$25.00) Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified C	of Status &	
	lailing Address egistration S		<u>Street Address:</u> Registration Secti	ion		
	ivision of Co		Division of Corpo			

P.O. Box 6327 Tallahassee, FL 32314

TO:

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

EVERWELL DIRECT PRIMARY CARE 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 Company were filed on 07/09/2024 and assigned Florida document number $\underline{\text{L.2400}}0305025$ This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: **EVERWELL HEALTH & WELLNESS** The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 1001 NW 62 STREET, SUITE 320A Enter new principal offices address, if applicable: FORT LAUDERDALE, FL 33309 (Principal office address MUST BE A STREET ADDRESS) 1001 NW 62 STREET, SUITE 320A Enter new mailing address, if applicable: FORT LAUDERDALE, FL 33309 (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

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.

City

If Changing Registered Agent, Signature of New Registered Agent

, Florida

Zip Code

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
			
			Remove
			□Change
			🗆 Add
			□Remove
			☐Change
			PH 3 ECRETIVE OF STALLAHASSES
			SECORETMEN OF STATE OF TALLAHASSES. FL
			□Remove
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(If an effective date, if other than the date (If an effective date is listed, the date must be Note: If the date inserted in this block document's effective date on the Depa	e of filing: specific and cannot be prior to date of filing or mo does not meet the applicable statutory filing timent of State's records.	(optional) ore than 90 days after filing.) Pursuant to 605 g requirements, this date will not be liste	.0207 (3)(b) ed as the
f the record specifies a delayed e b) The 90th day after the record	fective date, but not an effective ti is filed.	me, at 12:01 a.m. on the earlie	er of:
OCTOBER 31	2024		
-P	D		
Sig	ature of a member or authorized representative of	of a member	
THOMASINA JAMES			

Page 3 of 3

Date of this notice: 10-21-2024

Employer Identification Number:

Form: SS-4

Number of this notice: CP 575 G

EVERWELL HEALTH & WELLNESS THOMASINA R JAMES SOLE MBR 1001 NW 62ND ST STE 408 FT LAUDERDALE, FL 33309

For assistance you may call us at: 1-800-829-4933

IF YOU WRITE, ATTACH THE STUB AT THE END OF THIS NOTICE.

WE ASSIGNED YOU AN EMPLOYER IDENTIFICATION NUMBER

Thank you for applying for an Employer Identification Number (EIN). We assigned you EIN 33-1571878. This EIN will identify you, your business accounts, tax returns, and documents, even if you have no employees. Please keep this notice in your permanent records.

Taxpayers request an EIN for their business. Some taxpayers receive CPE75 notices when another person has stolen their identity and are opening a business using their information. If you did not apply for this EIN, please contact us at the phone number or address listed on the top of this notice.

When filing tax documents, making payments, or replying to any related correspondence, it is very important that you use your EIN and complete name and address exactly as shown above. Any variation may cause a delay in processing, result in incorrect information in your account, or even cause you to be assigned more than one EIN. If the information is not correct as shown above, please make the correction using the attached tear-off stub and return it to us.

A limited liability company (LLC) may file Form 8832, Entity Classification Election, and elect to be classified as an association taxable as a corporation. If the LLC is eligible to be treated as a corporation that meets certain tests and it will be electing S corporation status, it must timely file Form 2553, Election by a Small Business Corporation. The LLC will be treated as a corporation as of the effective date of the S corporation election and does not need to file Form 8832.

To obtain tax forms and publications, including those referenced in this notice, visit our Web site at www.irs.gov. If you do not have access to the Internet, call 1-800-829-3676 (TTY/TDD 1-800-829-4059) or visit your local IRS office.