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11/22/2024

D	ate:	11/22/2024	- will
		Acc#I20160000072	
Name:	Spear Phys	ical Therapy Chelsea	, PLLC
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CUVER LETTER

TO:

Registration Section Division of Corporations

Tallahassee, FL 32314

### Spear Physical Therapy Chelsea, PLLC SUBJECT: Name of Limited Liability Company The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Dan Rootenberg Name of Person Spear Center Firm/Company 31 E 32nd Street, 4th Floor Address New York, NY 10016 City/State and Zip Code dan@spearcenter.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Name of Person Daytime Telephone Number Enclosed is a check for the following amount: □ \$25.00 Filing Fee ☐ \$30.00 Filing Fee & □ \$55.00 Filing Fee & 1 \$60.00 Filing Fee, Certificate of Status Certificate of Status & Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed) Mailing Address: **Street Address:** Registration Section Registration Section **Division of Corporations Division of Corporations** P.O. Box 6327 The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## locusign Envelope ID: 18D7408C-64D3-4AF9-890B-993CE9EBD228 ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

ARTICLES OF ORGANIZATION
OF OF
Spear Physical Therapy Chelsea, PLLC
(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 11/21/2024 and assigned
Florida document number <u>L24000489995</u> .
This amendment is submitted to amend the following:
A. If amending name, enter the new name of the limited liability company here:
Spear Physical Therapy Chelsea, LLC
The new name must be distinguishable and contain the words "Limited Liability 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)
(Frincipul office dualess MOST BE ATSTREET ADDICESS)
Farence and mobilizer address of continue line.
Enter new mailing address, if applicable:
(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 register
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.
If Changing Registered Agent, Signature of New Registered Agent

ocusign Envelope ID: 18D7408C-64D3-4AF9-890B-993CE9EBD228
Transcring Authorized rerson(s) authorized to manage, enter the title, name, and address of each person being added of removed from our records:

MGR = Manager AMBR = Authorized Member

Title	<u>Name</u>	Address	Type of Action
			□Remove
			Change
			□Add
			□Remove
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		□Add	
		□Remove	
			☐ Change
			□Remove
			□Change

	The purpose of the limited liability company shall be the transaction of any or all lawful business for which
	limited liability companies may be organized under the laws of the state of Florida.
	· · · · · · · · · · · · · · · · · · ·
f an e Note:	tive date, if other than the date of filing: November 25, 2024 (optional)  fiective 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  If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as ment's effective date on the Department of State's records.
e reco rd is t	and 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 filed.
	November 21 2024
Dated	