

**L25000114932**

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To:

Division of Corporations  
Fax Number : (850)617-6383

From:

Account Name : A PLUS ACCOUNTING GROUP LLC  
Account Number : I20210000188  
Phone : (786)348-3628  
Fax Number : (786)513-2455

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

Email Address: \_\_\_\_\_

2025 SEP 12 AM 9:29

FILED

RECEIVED

2025 SEP 12 PM 4:29

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

LLC AMND/RESTATE/CORRECT OR M/MIG RESIGN  
LB SPECTRUM THERAPY LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** LB SPECTRUM THERAPY LLC

\_\_\_\_\_  
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:

URSULA BAREA

\_\_\_\_\_  
Name of Person

LB SPECTRUM THERAPY LLC

\_\_\_\_\_  
Firm/Company

12949 SW 57TH TER

\_\_\_\_\_  
Address

MIAMI, FLORIDA 33183

\_\_\_\_\_  
City/State and Zip Code

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

URSULA BAREA

\_\_\_\_\_  
Name of Person

786

331-0133

at (\_\_\_\_\_) \_\_\_\_\_

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &  
Certificate of Status

☐ \$55.00 Filing Fee &  
Certified Copy  
(additional copy is enclosed)

☐ \$60.00 Filing Fee,  
Certificate of Status &  
Certified Copy  
(additional copy is enclosed)

Mailing Address:

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Street Address:

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 2025 SEP 12 AM 9: 29  
OF**

LB SPECTRUM THERAPY 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 03/07/2025 and assigned  
Florida document number L25000114932.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

N/A

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:

12949 SW 57TH TER MIAMI, FL 33183

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

SAME AS ABOVE

(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 registered agent and/or the new registered office address here:**

Name of New Registered Agent:

URSULA BAREA

New Registered Office Address:

12949 SW 57TH TER

*Enter Florida street address*

MIAMI

*City*

Florida 33183

*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



D. If amending any other information, enter change(s) here, (Attach additional sheets, if necessary.)

REMOVING YOVANIS LAM AS MGR

Ursula Barea Flores  
2A27309EC0C7\*18...

2025 SEP 12 AM 9:29

FILED

E. Effective date, if other than the date of filing: 09/09/2025 (optional)

(If an effective 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)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record 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 record is filed.

Dated SEPTEMBER 09TH, 2025

DocuSigned by:  
Ursula Barea Flores  
2A27309EC0C7\*18...

Signature of a member or authorized representative of a member

Ursula Barea Flores

Typed or printed name of signee