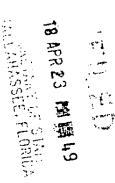
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Certified Copies Certificates of Status
Special Instructions to Filing Officer:

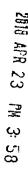
Office Use Only



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J. LEGGETT APR 24 2018



CORPORATION SERVICE COMPANY 1201 Hays Street Tallahassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195 REFERENCE: 176880 5166594 AUTHORIZATION : COST LIMIT : \$55.00 ORDER DATE: April 23, 2018 ORDER TIME : 3:20 PM ORDER NO. : 176880-010 CUSTOMER NO: 5166594 FOREIGN FILINGS NAME: COLORADO DIAGNOSTIC LABORATORY, LLC _ CORPORATE LIMITED PARTNERSHIP XXX LIMITED LIABILITY COMPANY XXXX WITHDRAWAL/CANCELLATION PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: XX CERTIFIED COPY _____ PLAIN STAMPED COPY CERTIFICATE OF STATUS

EXAMINER:

CONTACT PERSON: Emily Croft - EXT# 62925

COVER LETTER

	gistration vision of	Section Corporations				
SUBJECT:	Colorado Diagnostic Laboratory, LLC					
SUBJECT.		(Name of Fore	ign Limited Liabilit	y Company)		
Dear Sir or l	Madam:					
The enclose	d withdra	wal and fee(s) are submitted	for filing.			
Please return	n all corre	espondence concerning this r	natter to the followi	ng:		
Gary Sherm	ıan		•			
		(Name of Person)	···-			
Corporation	Service	Company				
		(Firm/Company)				
1180 Avem	ue of the	Americas, Suite 210				
		(Address)		_		
New York,	NY 1003	6				
		(City/State and Zip Code)	_		
For further i	nformati	on concerning this matter, plo	ease call:			
Gary Sherm	nan		800 at (927 9801 ext. 62049		
	(Na	ime of Person)		& Daytime Telephone Number)		
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314				
Enclosed is	a check	for the following amount:				
□ \$25 Filin	g Fee	□ \$30 Filing Fee & Certificate of Status	■ \$55 Filing Fee & Certified Copy	& □ \$60 Filing Fee, Certificate of Status & Certified Copy		

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

Colorado Diagnostic Laboratory, LLC			
(Name of limited liability company)			-
Colorado			
(Jurisdiction of its organization)			_
April 11, 2014			
(Date registered with Florida Department of State)			_
M14000002485			
(Florida Document Number)			-
This limited liability company is withdrawing its certificate of authority in this state	ð .		
Effective Date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be prior to date o more than 90 days after filing.) Note: If the date inserted in this block does not meet the applicable statutory filing this date will not be listed as the document's effective date on the Department of St. Docusigned by: William J. O'Shanghuressy, Jr.	require	ments,	
(Signature of authorized representative)			
William J. O'Shaughnessy, Jr.			
(Typed or printed name of signee)	LABASSEE, FLORID	APR 23 階級 49	A TAN

Filing Fee: \$25.00

L186006378171 19542415600 From: Tax House 2018-04-23 13:51:34 (GMT)

Page 2 of 3

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AMENDED AND RESTATED ARTICLES OF ORGANIZATION OF L18000037814

a Florida limited liability company

The understaned, as an authorized representative of the member of FLORIDA GREAT MINDS LLC, as Florida limited liability company (the "Company"), pursuant to the provisions of Section 608.411 of the Florida Limited Liability Act, hereby amends and restates the Article of Organization of the Company which were originally filed on February 12, 2018 under Document # L18000037814. The Articles of Organization are hereby amended and restated as follows:

ARTICLE I

NAME

The name of the limited liability company is FLORIDA GREAT MINDS LLC

ARTICLE II ADDRESS

The mailing address and street address of the principal office of the Company are: 10230 LAKE VISTA CT PARKLAND, FL 33076

ARTICLE III REGISTERED OFFICE AND AGENT

The name and street address of the Company's registered agent is: Tax House Corporation 1100 South Federal Hay Deerfield Beach, PL 33/41

ARTICLE IV MANAGER(a) >1

The name and street address of the Company's Authorized Members are:

ADLER CANEPPA LLC

AMBR

10230 LAKE VISTA CT PARKLAND, FL 33076

MCMORATS LLC

AMBR

16442 PANTHEON PASS DELRAY BEACH, PL 33446

FIT & SUAVE LLC

AMBR

2201 SW 13TH AVE FORT LAUDERDALE, FL 33315

The NEW Authorized Member representative signature is LUIZ FELIPE ADLER CANEPPA

IN WITNESS WHEREOF, the undersigned has executed these Amended and Restated Articles of Organization this APRIL 4, 2018.

By: Luiz Falipe Adler Caneppa

Name: LUIZ ELIPE ADLER CANEPPA

Title: Authorized Member



1100 SOUTH FEDERAL MANY | DEERFIELD BEACH | FLORIDA | 33441 PHONE (954) 482-5000 | FAX (954) 241-5600 | banhouse.us

(*)