16000008106

(Requestor's Name)					
(Address)					
(Address)					
(Cil	ty/State/Zip/Phone	e #)			
PICK-UP	MAIT WAIT	MAIL			
(Business Entity Name)					
(Document Number)					
Certified Copies	Certificates of Status				
Special Instructions to Filing Officer:					

Office Use Only



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RECEIVED

CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195					
REFERENCE : 102336 8186530					
AUTHORIZATION: Topell Reman					
COST LIMIT : \$ 25.00					
ORDER DATE: October 13, 2021					
ORDER TIME : 2:14 PM					
ORDER NO. : 102336-015					
CUSTOMER NO: 8186530					
FOREIGN FILINGS					
NAME: UNIFIED HEALTH, LLC					
CORPORATE LIMITED PARTNERSHIP LIMITED LIABILITY COMPANY					
XXXX AMENDMENT					
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:					
CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING					

EXAMINER:

CONTACT PERSON: Eyliena Baker -- EXT# 61594

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

SECTION I (1-4 must be completed)

1. Name of limited liability Comp	oany as it appears	on the rec	ords of the Flori	da Department of	
State: UNIFIED HEALTH, LLC					
State:			<u>.</u>		
Enter new principal office address	, if applicable:				
(<u>Principal office address</u> MUST BE A STREET ADDRES.	<u>s</u>)				
Enter new mailing address, if appl (Mailing address MAY BE A POST OFFICE BOX					
2. The Florida document number of	of this limited liab	oility comp	any is: M16000	0008106	
3. Jurisdiction of its organization:					جـــ
4. Date authorized to do business	in Florida: 10/07	7/2016			<u> </u>
SECTION 11 (5-9 complete only	the applicable c	hanges)			
5. New name of the limited liabili	ty company: (must	contain "L	imited Liability	Company, ""L.L.	The LLC THE
(If name unavailable, enter alterna copy of the written consent of the must contain "Limited Liability Co	managers or man	aging mem	bers adopting the	ing business in Flor ne alternate name. T	ida and attach a The alternate name
6. If amending the registered agent registered agent and/or the new registered agent			dress on our rec	cords, <u>enter the nan</u>	ne of the new
Name of New Registered Agent:	Corporation Ser	vice Comp	any		
New Registered Office Address:	1201 Hays Street	et			
			Enter Fl	orida Street Addres	
	Talla	ahassee		, Florida _	2301 Zip Code
			City		Zip Code
New Registered Agent's Signature I hereby accept the appointment at the provisions of all statutes relational and accept the obligations of my properties to merely in the best of the company has been notified.	s registered agen we to the proper o osition as registe reflect a change i I in writing of thi	t and agree and comple red agent on the regist is change.	to act in this co te performance is provided for ered office addi	of my duties, and I in Chapter 605, F.S ress, I hereby confit	am familiar with LOr, if this on that the limited

3. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(e), indicate that change:					
itle/ Capacity	Name	<u>Address</u>	Type of Action		
			Add		
			□Remo		
	<u>. </u>		□Add		
			□Remo		
			Add		
			□Remo		
			□Remo		
			□Add		
aforementioned am	icate, if required: no more than 90 day endment(s), duly authenticated by the he law of which this enti	e official having custody of record	□Remo		
	Jayne Rothma				

Filing Fee: \$25.00

Page 1

Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY THAT THE CERTIFICATE OF CONVERSION

OF AN UTAH LIMITED LIABILITY COMPANY "UNIFIED HEALTH, LLC" TO A

DELAWARE LIMITED LIABILITY COMPANY "UNIFIED HEALTH, LLC", WAS

FILED IN THIS OFFICE ON THE EIGHTEENTH DAY OF MAY, A.D. 2021,

AT 6:29 O'CLOCK P.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID LIMITED

LIABILITY COMPANY IS DULY FORMED UNDER THE LAWS OF THE STATE OF

DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE NOT

HAVING BEEN CANCELLED OR DISSOLVED SO FAR AS THE RECORDS OF

THIS OFFICE SHOW AND IS DULY AUTHORIZED TO TRANSACT BUSINESS.



Authentication: 204400760 Date: 10-13-21

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