



**State of Rhode Island
Office of the Secretary of State**

Fee: \$50.00

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040

**Limited Liability Company
Articles of Amendment**

(Section 7-16-12 of the General Laws of Rhode Island, 1956, as amended)

ARTICLE I

The name of the limited liability company is Preventive Cardiology And Integrative Weight Loss LLC

If the name is changing, state the new name: Preventive Cardiology And Integrative Weight Loss LLC

ARTICLE II

The Articles of Organization of the limited liability company as amended or restated to date are as follows, including, if applicable, a change made in Article I:

If the address of the principal office of the limited liability company is changing, so state:

No. and Street: 2348 POST RD
SUITE 104
City or Town: WARWICK State: RI Zip: 02886 Country: US

If the company duration is changing, so state: ☒ Perpetual ☐

If the company purpose is changing, so state:

If the management of the limited liability company is changing, modify the following section:

☒ Members or ☐ Managers (check one)

The name and address of each manager (If LLC is managed by Members, DO NOT complete this section):

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
-------	--	--

If there are any other provisions to be amended, so state:

PLEASE CHANGE TAX DESIGNATION (ARTICLE III) OF THE COMPANY TO:
PARTNERSHIP

PLEASE CHANGE THE ADDRESS OF AUTHORIZED SIGNER TO: 2348 POST RD SUITE
104,
WARWICK, RI 02886

ARTICLE III

The effective date of this Amendment, if later than the date of the filing of these Articles of Amendment (not prior to, nor more than 90 days after, the filing of these Articles of Amendment), is:

Later Effective Date:

This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.

Signed this 15 Day of October, 2025 at 3:26:00 PM by the Authorized Person.

AHMED TAHA

Preventive Cardiology And Integrative Weight Loss LLC

Form No. 401
Revised 09/07

© 2007 - 2025 State of Rhode Island
All Rights Reserved



State of Rhode Island

Department of State | Office of the Secretary of State

Gregg M. Amore, *Secretary of State*

I, GREGG M. AMORE, Secretary of State of the State of Rhode Island,

hereby certify that this document, duly executed in accordance with the provisions

of Title 7 of the General Laws of Rhode Island, as amended, has been filed in this

office on this day:

October 15, 2025 03:23 PM

A handwritten signature in black ink, reading "Gregg M. Amore". The signature is written in a cursive style.

Gregg M. Amore
Secretary of State

