

Requester Name: Albert Folds
 Address: 3300 Christiansburg
 City/State/Zip: Alford FL 32420
 Phone #: _____

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. Folds Medical, LLC
 (Corporation Name) (Document #)
2. _____
 (Corporation Name) (Document #)
- _____
 (Corporation Name) (Document #)
- _____
 (Corporation Name) (Document #)

RECEIVED
 00 MAR -9 PM 3:16
 DEPARTMENT OF STATE
 DIVISION OF CORPORATIONS
 TALAHASSEE, FLORIDA

SECRETARY OF STATE
 TALAHASSEE, FLORIDA

00 MAR -9 PM 3:16

APPROVED
 AND
 FILED

- Walk in Pick up time Certified Copy
 Mail out Will wait Photocopy Certificate of Status

NEW FILINGS

- Profit
- Not for Profit
- Limited Liability
- Domestication
- Other

AMENDMENTS

- Amendment
- Resignation of R.A., Officer/Director
- Change of Registered Agent
- Dissolution/Withdrawal
- Merger

700003164457--1
 -03/10/00--01001--011
 *****25.00 *****25.00

L00-2011
 OK 3-9

OTHER FILINGS

- Annual Report
- Fictitious Name

REGISTRATION/QUALIFICATION

- Foreign
- Limited Partnership
- Reinstatement
- Trademark
- Other

Examiner's Initials

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

Folds Medical LLC

(Present Name)
(A Florida Limited Liability Company)

FIRST: The date of filing of the articles of organization was 2-23-2000

SECOND: The following amendment(s) to the articles of organization was/were adopted by the limited liability company:

Article I
Change name to
Folds, LLC

SECRETARY OF STATE
TALAHASSEE, FLORIDA

00 MAR -9 PM 3:17

APPROVED
AND
FILED

Dated 2-9, ~~19~~ 2000

Albert R. Folds

Signature of a member or authorized representative of a member

Albert R. Folds

Typed or printed name of signee

Filing Fee: \$25.00