

L04000034177

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(City/State/Zip/Phone #)

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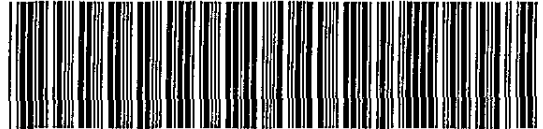
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TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: HiMed, 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:

Karen Lockwood
(Name of Person)

Access Healthcare, LLC
(Firm/Company)

5350 Spring Hill Drive
(Address)

Spring Hill, Florida 34606
(City/State and Zip Code)

For further information concerning this matter, please call:

Karen Lockwood at (352) 688-1733
(Name of Person) (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)

STREET ADDRESS:
Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

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**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

HiMed, LLC

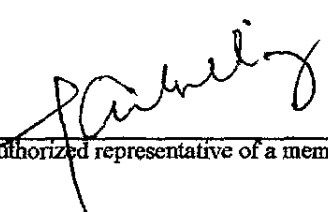
(Present Name)
(A Florida Limited Liability Company)

FIRST: The Articles of Organization were filed on May 4, 2004 and assigned
document number L04000034177

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

COMPANY NAME CHANGE TO: OSHO, LLC

Dated March 4, 2005



Signature of a member or authorized representative of a member

PARIKSITH SINGH

Typed or printed name of signee

Filing Fee: \$25.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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