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SECRETARY OF STATE
TALLAHASSEE FLORIDA

05 DEC -5 AM 9:42

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: DR. JOSE R. GONZALEZ-SEPULVEDA, M.D. 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:

ANTHONY POLLAK
(Name of Person)

(Firm/Company)

1157 SOUTH S.R. # 7
(Address)

WELLINGTON, FL 33414
(City/State and Zip Code)

SECRETARY OF STATE
TALLAHASSEE FLORIDA

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For further information concerning this matter, please call:

ANTHONY POLLAK at (561) 795-3330
(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)

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

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 22, 2005

ANTHONY POLLAK
1157 SOUTH S.R. #7
WELLINGTON, FL 33414

SUBJECT: DR. JOSE R. GONZALEZ-SEPULVEDA, M.D. LLC
Ref. Number: L04000052587

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

05 DEC -5 AM 9:42

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We have received your document for DR. JOSE R. GONZALEZ-SEPULVEDA, M.D. LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain written acceptance by the registered agent, (i.e. "I hereby am familiar with and accept the duties and responsibilities as registered agent for said corporation/limited liability company"); and the registered agent's signature.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6097.

Marsha Thomas
Document Specialist

Letter Number: 005A00068792

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

DR. JOSE R. GONZALEZ - SEPULVEDA, M.D. LLC
(Present Name)
(A Florida Limited Liability Company)

FIRST: The Articles of Organization were filed on 07/15/2004 and assigned document number L04000052587

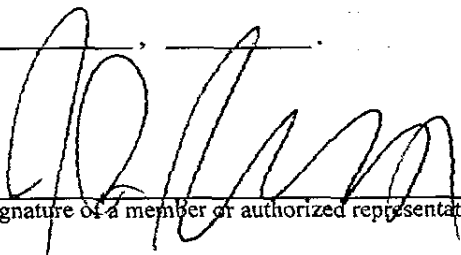
SECOND: This amendment is submitted to amend the following:

NAME CHANGE TO: WELLINGTON MEDICAL ASSOCIATES, L

ADDRESS CHANGE TO: 12953 PALMS WEST DRIVE, # 202
LOXAHATCHEE, FL 33470

REGISTERED AGENT TO: ANTHONY POLLAK
1157 SOUTH S.R # 7
WELLINGTON, FL 33414

Dated 11/16/05


Signature of a member or authorized representative of a member

DR. JOSE R. GONZALEZ - SEPULVEDA
Typed or printed name of signee

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

05 DEC - 5 AM 9:42

FILED

November 29, 2005

Florida Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, Florida 32314

RE: Registered Agent
L04000052587

FILED
05 DEC -5 AM 9:42
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

To Whom It May Concern:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S..

Sincerely,



Anthony Pollak