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To:

Division of Corporations

Fax Number : (850)205-0383

From:

Account Name : THE HOGAN LAW FIRM

Account Number : 120010000137 Phone : (352)799-8423 Fax Number : (352)799-8294

SMAY - IL AM 10: 31

LIMITED LIABILITY AMENDMENT

QUALITY QUEST REHAB SERVICES, LLC

Certificate of Status	1
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Electronic Filing Menu.

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TRANSMITTAL LETTER

	XXCZ.				
	ation Section n of Corporations				
SUBJECT:	QUALITY QUEST REHA	AB SERVICES, LLC			
SOBSECT:		Limited Liability Company)			
The enclosed Ar	ticles of Amendment and fee(s) are	submitted for filing			
Picase return ail	correspondence concerning this ma	uer to the following:			
	Shannon 3				
		(Name of Person)			
	Hogan L	aw Firm (Firm/Company)			
		(с имехлирацу)			
	20 Sou	th Broad Street			
		(Address)	- · · · · ·	7 7	
	Brooksvi	ie, FL 34601		15 P	
	(Cl	y/State and Zip Code)		- E	
For further inform	ation concerning this matter, please	call.		SHAY -4 AH 9:3	יורבס
Sha	nnon J. Laviano	at (352) 799-842	23	9	
	(Name of Person)	(Area Code & Daytimo	: Telephone Number)		
Enclosed is a check	for the following amount:				
[] \$25 00 Filing Fee	Certificate of Status	☐ \$55.00 Filing Fce & Certified Copy (additional copy is enclosed)	☐ .\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enc		

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 May. 4. 2005 7:54AM Hogan Law Firm (((HQ50001136643)))

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	QUALITY QUEST REHAB SERVICES, LLC			
~ _	(Present Name) (A Florida Limited Liability Company)			
FIRST:	The Articles of Organization were filed on March 28, 2005 and assigned document number L05000030407			
SECOND:	The following amendment(s) to the Articles of Organization was/were adopted by the liability company:	limited		
	see attached			
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			05 MIY -4	
				CELL CELL
	· ·	38	M 9:3	O
		중대	$\frac{\omega}{\omega}$	
Dated/	7114 4 2005			
	Signature of a moniber or authorized representative of a member			
	Shannon J. Laviano			

Filing Fce: \$25.00

Typed or printed name of signee

No.6770 P. 4

ARTICLE V

The name and address of managing members/managers are:

Title: MGRM LIANNA RIGGS 3211 GLENBROOK AVENUE SPRING HILL FLORIDA 34608

Title: MGRM WILBERT R. ANOOS 3401 ROSEBAY COURT SPRING HILL FLORIDA 34609

Title: MGRM
MARISOL S. BELICENA
2 JUNGLEPLUM COURT EAST
HOMOSASSA FLORIDA 34446

Title: MGRM SCOTT R. FOOTE 8361 COFIELD LANE SPRING HILL FLORIDA 34608

Title: MGRM DIANA L. MADRID 817 OAK STREET INVERNESS FLORIDA 34452 HAY -4 AM 9:31