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TALLAHASSEE, FLORIDA

NOV 29 2005

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Curlew Medical Center 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:

Louis C. Scourtas
(Name of Person)
Louis Scourtas & Associates, Inc.
(Firm/Company)
24761 US Hwy 19 N Suite 630
(Address)
Clearwater, FL 33763
(City/State and Zip Code)

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TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Louis C. Scourtas at (727) 443-0709
(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

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

Curlew Medical Center LLC

(Present Name)
(A Florida Limited Liability Company)

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2005 NOV 21 AM 11:58
CLERK OF CORPORATIONS
TALLAHASSEE, FLORIDA

FIRST: The Articles of Organization were filed on October 31, 2005 and assigned document number L05000105974.

SECOND: This amendment is submitted to amend the following:

Article V. - Additional Names and addresses of Managing Members/Managers are as follows:

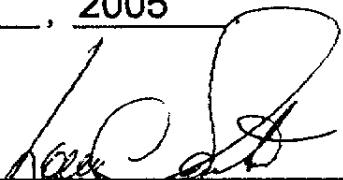
TITLE: MGR NAME: Elkyman, Ezra ADDRESS: 24761 US Hwy 19 N Suite 630, Clearwater, FL 33763 US

TITLE: MGR NAME: Case, Brad ADDRESS: 24761 US HWY 19 N Suite 630, Clearwater, FL 33763 US

TITLE: MGR NAME: Sankoorkal, Antony ADDRESS: 24761 US Hwy 19 N Suite 630, Clearwater, FL 33763 US

TITLE: MGR NAME: Som, Ananda ADDRESS: 24761 US Hwy 19 N Suite 630, Clearwater, FL 33763 US

Dated November 1, 2005



Signature of a member or authorized representative of a member

Louis C. Somers

Typed or printed name of signee

Filing Fee: \$25.00