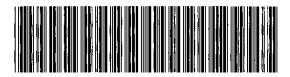
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COVER LETTER

TO: Registration Division of	n Section Corporations		
SUBJECT: ALE	X ROJAS M D LLC		
Sebster.		imited Liability Company)	
The enclosed Article	es of Amendment and fee(s) are su	ibmitted for filing.	
Please return all cor	respondence concerning this matte	er to the following:	
	ALEX ROJAS		
		(Name of Person)	
	ALEX ROJAS M D LL	.c	
		(Firm/Company)	07 07
	805-1 EAST OAK S	TREET	OT NOV 13 PH 4: 07
	:	(Address)	13 OF C
KISSIMMEE, FL 34744		PH	
	(City	/State and Zip Code)	ATTE
For further informat	ion concerning this matter, please	call:	ZNO
ALEX F	ROJAS	at (407) 933-i	0021
	(Name of Person)	(Area Code & Daytim	
Enclosed is a check for	r 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)
	AILING ADDRESS:	STREET/COURI	ER ADDRESS:
Registration Section		Registration Section	

P.O. Box 6327 Tallahassee, FL 32314

тo:

Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Present Name)
(A Florida Limited Liability Company)

ALEX ROJAS M D LLC

FIRST:	The Articles of Organization were filed on 04/12/2007 and assigned document number L07000039246 and assigned
SECOND:	This amendment is submitted to amend the following: ARTICLE II - NEW STREET AND MAILING ADDRESS:
	805-1 EAST OAK STREET, KISSIMMEE, FL 34744
	ARTICLE V - ADD MANAGING MEMBER/MANAGER:
	BEDA ROJAS TITLE: MGR

805-1 EAST OAK STREET, KISSIMMEE, FL 34744

Dated NOVEMBER 01	, 2007	
	A · Royai gnature of a member or authorized representative of a m	

ALEX ROJAS:

Typed or printed name of signee

Filing Fee: \$25.00