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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

B. BOSTICK  
OCT 24 2011  
EXAMINER

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: FLORIDA FAMILY CLINIC 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:

**RICARDO FRANCISCO GUTIERREZ**  
Name of Person

**FLORIDA FAMILY CLINIC LLC**  
Firm/Company

**1800 SW 27TH AVE SUITE 214**  
Address

**MIAMI, FL. 33145**  
City/State and Zip Code

**RFGMARQUES@GMAIL.COM**  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

**RICARDO FRANCISCO GUTIERREZ** at ( **786** ) **923-7403**  
Name of Person Area Code & Daytime Telephone Number

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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**

**FLORIDA FAMILY CLINIC LLC**

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 02-04-2008 and assigned Florida document number L08000012696.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

1800 SW 27TH AVE SUITE 214

MIAMI, FL. 33145.

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

1800 SW 27 TH AVE SUITE 214

MIAMI, FL. 33145

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**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent:

RICARDO FRANCISCO GUTIERREZ

New Registered Office Address:

1800 SW 27TH AVE SUITE 214

*Enter Florida street address*

MIAMI

Florida

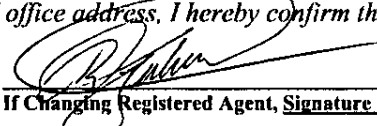
33145

*City*

*Zip Code*

**New Registered Agent's Signature, if changing Registered Agent:**

*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 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. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.*



If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager  
MGRM = Managing Member

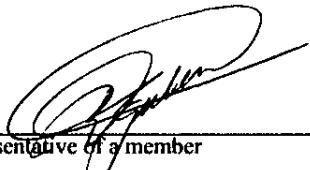
<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	RICARDO F. GUTIERREZ	1800 SW 27TH AVE SUITE 214 MIAMI FL 33145	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGR	the friendly companies inc.	15798 SW 74 ST MIAMI FL 33193	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

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Dated 10-19-2011

*the friendly companies inc.*   
 Signature of a member or authorized representative of a member

THE FRIENDLY COMPANIES, RICARDO FRANCISCO GUTIERREZ  
 Typed or printed name of signee