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10 MAR 26 AM II: 32
SECRETARY OF STATE

COVER LETTER

TO: Registration Sec Division of Corp	
SUBJECT: 19	10 medical Clinic LLC
	Name of Limited Liability Company
The enclosed Articles of A	mendment and fee(s) are submitted for filing.
Please return all correspon	dence concerning this matter to the following:
	Kristina Brana
	1910 Medical Clinic LLC
	Timizonpany
	1910 Manatee Ave W
	bradentin & 34205
4.A	City/State and Zip Code 1910 Pain a 9 Mail. Com E-mail address: (to be used for future annual report notification)
For further information co	oncerning this matter, please call:
Kristina Name of	Brana at (94) 747 – 0935 Person Area Code & Daytime Telephone Number
Name of	
Enclosed is a check for th	e following amount:
\$25.00 Filing Fee	\$30.00 Filing Fee & S55.00 Filing Fee & S60.00 Filing Fee, Certificate of Status 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

medical Clinic LLC 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) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)

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:

Kristina Brana 1910 Manatel Are

New Registered Office Address:

Bradenton Enter Florida street address
Florida 34205

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 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

MICHAIN - MIN	maging Member		
Title	Name	Address	Type of Action
MG RM	Rim Iplaev	1910 Manatee Ar W Brailenton & 34205	Add Remove
MGRM	Kristina Brana	1910 Manatee Ave W Bradenton & 34205	Add Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
D. If amendi	ng any other information, enter change(s) here: (Attach additional sheets, if necessary.)	FILED 10 MAR 26 AM II: 32 SECREJARY OF STATE
Dated	March 22 Roll	D. Dian.	
-	Signature of a member o	r authorized representative of a member	
	Typed o	r printed name of signee	

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Filing Fee: \$25.00