

18000013460

(Requestor's Name)

(Address)

(Address)

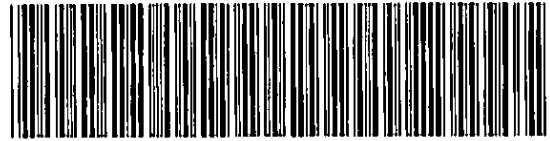
(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____



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TALLAHASSEE, FLORIDA

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Blada Uspenky **DAVE**

AUTHORIZATION BY PHONE TO

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DATE *11/14/18*

BY *Blw*

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BL MORISEK

NOV 14 2018

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

South Central General Psychiatry 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 1/16/2018
Florida document number 118000013460

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

This amendment is submitted to amend the following:

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

South Central General and Geriatric Psychiatry LLC

The new name must be distinguishable and contain 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)

1220 Adams Street
Hollywood FL
33019

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

1220 Adams Street
Hollywood FL
33019

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: _____

New Registered Office Address: _____

Enter Florida street address

_____, Florida _____
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 605, 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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Arthur Lyakhovetsky		<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
		1220 Adams Street, Hollywood FL 33019	<input checked="" type="checkbox"/> Change
MGR	Rada Uspensky		<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
		1220 Adams Street, Hollywood FL 33019	<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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