Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H11000160748 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : AGI REGISTERED AGENTS, INC.

Account Number : 120000000205

; (305)416-6800

Fax Number

: (305)416-6811

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email	Address:		

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN MER VENTURES, LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

Electronic Filing Menu Corporate Filing Menu

JUN 20 2011

6/16/2011

3054166811

Tallahassee, FL 32314

COVER LETTER

H110001607483

TO:	Registration Se Division of Cor					
SUBJE	CT.	MER VE	NTURES, LLC			
OC DOE			Name of Limited Liability Company			
The end	closed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Picase :	return all correspo	endence concerning this matter	to the following:			
			Diane M. Hernandez			
			Name of Person			
			Adams Gallinar, P.A.			
			Firm/Company			
		1000 E	Brickell Avenue, Suite	300		
			Address			
		,	Alomi Florido 22424			
Mlami, Florida 33131 City/State and Zip Code						
		dhe	ernandez@agilaw.con	n .		
		E-mail address: (t	o be used for future annual repo	ort politication)		
For fun	ther information o	concerning this matter, please c	all:			
	Diane	M. Hernandez	at (305)	416-6800 Daytime Telephone Number		
	Name o	f Person	Area Code &	Daytime Telephone Number		
Enclose	ed is a check for t	he following amount:				
\$25	.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is en	\$60.00 Filing Fee, Certificate of Status & nclosed) Certified Copy (additional copy is enclosed)		
		ING ADDRESS:	_	COURIER ADDRESS:		
Registration Section Division of Corporations P.O. Box 6327		Registration Division of Clifton Buil	Corporations			

2661 Executive Center Circle Tallahassee, FL 32301

H110001607483

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MED	VENTURES II.S		
MER (Name of the Limited Liability (A Florida	VENTURES, LLC y Company as it now addesi	s on our records.)	
(A Florida	Limited Liability Company)		S S
The Articles of Organization for this Limited Liability	Company were filed on	8/20/2010	and assigned A
Florida document numberL10000087827	<u>.</u>		AMERICATIONS
This amendment is submitted to amend the following:			ν
A. If amending name, enter the new name of the lin	nited liability company her	<u>e</u> :	
The new name must be distinguishable and end with the we "L.L.C."	ords "Limited Liability Compa	my," the designation "I	LC" or the abbreviation
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADD	RESS)		
Enter new mailing address, if applicable:		A	
(Mailing address MAY BE A POST OFFICE BOX)			
•			
B. If amending the registered agent and/or registered agent and/or the new registered office ad-		our records, <u>enter</u>	the name of the new
Name of New Registered Agent:			
New Registered Office Address:		<u></u>	
	En	ter Florida street ada	lress
		, 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 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

Page 1 of 2

MGR = Manager

H1100160748 3.
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:

MGRM =	= Managing Member		
<u>Title</u>	Name	Address	Type of Action
MGR	Mario Scarpetta Gnecco	1000 Brickell Avenue, Suite 300 Mlami, Florida 33131	Add _☑ Remove
MGR	MER Management Services, LLC a Delaware limited liability company	1000 Brickell Avenue, Suite 300 Miami, Florida 33131	☐ Add ☐ Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
D. If am	ending any other information, enter change	(s) here: (Attach additional sheets, if necessary.)	SECRETARY OF STATE DIVISION OF CORPORATION IN THE SELECTION OF STATE OF SELECTION O
Dated	June 16 , 201	Thursday -	6 IONS
	Signature of a member of	or authorized representative of a member	_
	/ \	ams, Authorized Signatory	
	Typed o	r printed name of signee	

Page 2 of 2

Filing Fee: \$25.00