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SECRETARY OF STATE
TALLANIASSEE. FLORIDA

C. LEWIS

JUL 1 3 2010

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Florida Institute of Health, LPD, LLLP
Name of Florida Limited Partnership or Limited Liability Limited Partnership
The enclosed Certificate of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to:
AVA ZAKEN Contact Person
Floring Institute of Health
4850 West OAKland Park Blud #205 Address
City, State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Contact Person at (954) 484-7030 Area Code and Daytime Telephone Number
Enclosed is a check for the following amount:
\$52.50 Filing Fee and Certificate of Status \$105.00 Filing Fee \$113.75 Filing Fee, Certified Copy, and Certificate of Status
STREET ADDRESS: Registration Section - Registration Section Division of Corporations Clifton Building P. O. Box 6327 2661 Executive Center Circle Tallahassee, FL 32301 MAILING ADDRESS: Registration Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

FILED

CERTIFICATE OF AMENDMENT

2010 JUL 12 PM 4: 03.

CERTIFICATE OF LIMITED PARTNERSHIP

SECRETARY OF STATE TALLAHASSEE, FLORIDA

Florida Institute of Health, Ltd. LLLP

Insert name currently on file with Florida Department of State

1112-11 114-110 041-011	ay on the with the	ida Boparanent or Sta		
Pursuant to the provisions of section 620.1 limited liability limited partnership, whose October 31, 1995, assign adopts the following certificate of amendments.	certificate was f red Florida docu	iled with the Flori ment number 49	da Department of 500000/638	State on
. This amendment is submitted to amend the following the f	owing:	•		
•	Ü			
A. If amending name, enter the new name of here:	of the limited par	tnership or limited	liability limited pa	irtnership
		1		
New name must be dis	tinguishable and co	ntain an acceptable su	ffix.	
Acceptable Limited Partnership suffixes: Limited Partnership suffixes Limited Liability Limited Partnership su			hip, L.L.L.P. or LLLF).
B. If amending mailing address and/or principal office address here:	principal office	address, <u>enter ne</u>	w mailing addres	s and/or
New Principal Office Address (Must be STREET address)	<u></u>			
New Mailing Address:				
(May be post office box)				
C. If amending the registered agent and/or new registered agent and/or the new registere			cords, enter the na	me of the
new registered agent and/or the new registere	u office address i	iere.		
Name of New Registered Agent:	· · · · · · · · · · · · · · · · · · ·			
New Registered Office Address:				
	Ei	nter Florida street ac		
-	City	, Flor	ida Zip Code	

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

2010 JUL 12 PM 4: 93

I hereby accept the appointment as registered agent and agree to act in this capacity Alfuent agree Ride agent and agree to act in this capacity Alfuent agree Ride agent and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

If Changing Registered Agent, Signature of New Registered Agent

D.	If amending the	general	partner(s),	enter the	name ar	d business	<u>address</u>	of eacl	ı general	partner	being
ad	<u>ded or removed fr</u>	om our i	records:		٠						

Title	<u>Name</u>	Address	Type of Action
<u>6</u> P.	Daniel Kesden, 40. F	PA 4850 W. Oakla Blud 1309 Lauderdale Lakes, A	Ad Park Add Add Remove 333/3
	Keth-Lerner M.D. Pi:	1209	X Remove
6 P	Gerald Noreasberg. 20. 548200 florida Institute os Surgery. P.A	Pr 8327 w. allantic Morzate FL 330	Add Add Remove
<u>6P</u>	florida Institute os Surgery. P.A	4900 W. Oakland Park #306 ouderdale Lakes, FL 3	B/w Add Remove
<u>6P</u>	Ryan Greene M.D P.H.D.	4900 W Dalland Pa Blvd , \$300	Add Remove
			Add Remove
	ed partnership or limited liability rship" status, enter change here:	/ limited partnership is a	mending its "limited liability
This Lim	ited Partnership hereby elects to be	a "Limited Liability Limite	d Partnership."
This Lim	ited Partnership hereby removes its	"Limited Liability Limited	Partnership" status.
(NOTE: If adding	g or removing" limited liability limited po	artnership" status; all general p	artners must sign this amendment.)

Daniel Kurden, M.P. Dr. Kessen Schald Mounter Caplengusian f. Institute Author Groune Dr. Lorner S52.50 S52.50 PG. Societa Dr. Vorensiger Authorized Dr. Vorensiger Dr. Vorensiger Authorized Dr. Vorensiger Authorized Dr. Vorensiger Authorized Dr. Vorensiger Authorized Dr. Vorensiger Dr. Vorensiger Authorized Dr. Vorensiger Authorized Dr. Vorensiger Authorized Dr. Vorensiger Dr. Vorensiger Dr. Vorensiger Authorized Dr. Vorensiger		į.
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