

*FROM :

Division of Corporations

PHONE NO. : 305 2533222

MAY 17 2010 11:10 AM P1

Page 1 of 1

L03000025175

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number / (850) 617-6383

From:

Account Name : NOEL R. PUIG LLC
Account Number : I20080000103
Phone : (305) 267-0334
Fax Number : (305) 267-0793

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

Email Address: ROMERO@NOELPUIG.COM

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
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SECRETARY OF STATE
DIVISION OF CORPORATIONS

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T. HAMPTON

MAY 18 2010

FROM :

PHONE NO. : 3052633222

May. 17 2010 11:04AM P2

((H10000112216 3)))

GENTLE CARE

PAGE 02

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: GENTLE CARE HOME HEALTH 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:

YADELKIS CRUZ

Name of Person

GENTLE CARE HOME HEALTH LLC

Firm/Company

7300 W 20TH AVENUE

Address

HIALEAH FL 33016

City/State and Zip Code

NPUIG@NOELPUIG.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

YADELKIS CRUZ

Name of Person

at (305)

822-9425

Area Code & Daytime Telephone Number

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

((H10000112216 3)))

FROM :

PHONE NO. : 3052633222

May. 17 2010 11:04AM P3

05/07/2010 16:12

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GENTLL CARE

PAGE 03

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

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GENTLE CARE HOME HEALTH 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 07/11/2003 and assigned
Florida document number L030000025175

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:

YADELKIS CRUZ

New Registered Office Address:

7300 W 20TH AVENUE

Enter Florida street address

HIALEAH

City

Florida

33016

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

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FROM :

PHONE NO. : 3052633222

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05/07/2010 16:12

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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

MCRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	YADELKIS CRUZ	7300 W 20TH AVENUE HIALEAH FL 33016	<input checked="" 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
			<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.)*

Dated _____



Signature of a member or authorized representative of a member

YADELKIS CRUZ

Typed or printed name of signer

Page 2 of 2

Filing Fee: \$25.00

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