Tuby (Requestor's Name)
5/0 SW Que B (Address)
(Address)
b+abelle 2/32322 (City/\$tate/Zip/Phone #) 850697 80/
(City/\$tate/Zip/Phone #) 850697 80/
PICK-UP WAIT MAIL
Castline Healty (1C (Business Entity Name)
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
103-31767

Office Use Only



100023535391

HLM

10/07/03--01052--008 **25.00

> DIVISION OF CONFORATION 03 DCT -7 PM 1: 44

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Present Name)
(A Florida Limited Liability Company) 8-25-2003 The date of filing of the articles of organization was ____ FIRST: SECOND: The following amendment(s) to the articles of organization was/were adopted by the limited liability company:

Filing Fee: \$25.00

Typed or printed name of

Signature of a member or author