

Division of Corporations
C030000040504

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LIMITED LIABILITY AMENDMENT

DIVERSIFIED HEALTHCARE SYSTEMS, LLC

Certificate of Status	1
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FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

April 14, 2005

DIVERSIFIED HEALTHCARE SYSTEMS, LLC
401 WEST PALM DR, STE 5
FLORIDA CITY, FL 33034SUBJECT: DIVERSIFIED HEALTHCARE SYSTEMS, LLC
REF: L03000040504

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The document must contain written acceptance by the registered agent, (i.e. "I hereby am familiar with and accept the duties and responsibilities as registered agent for said corporation/limited liability company"); and the registered agent's signature.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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Marsha Thomas
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ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

DIVERSIFIED HEALTHCARE SYSTEMS, LLC
(Present Name)
(A Florida Liability Company)

First: The Articles of Organization were filed on October 22, 2003 and assigned document number L03000040504.

Second: The following amendment(s) to the Articles of Organization were adopted by the Limited Liability Company:

- o Amendment One (1): Article III – Change of Registered Agent and/or Registered Office,

Doris Bigus
401 West Palm Drive
Suite 5
Florida City, FL 33034

- o Amendment Two (2): Article IV- Change/Addition of Manager(s) or Managing Member(s):

Delete: MGRM

Diego F. Arce
12725 SW 62 Terrace
Miami, FL 33183

Dated: April 12, 2005

Doris Bigus

Signature of a Member or Authorized Representative of a Member

Doris Bigus

Typed or Printed Name of Signee

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**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR
BOTH FOR LIMITED LIABILITY COMPANY**

*Pursuant of the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned
Limited Liability Company submits the following statement in order to change its Registered Office or
Registered Agent, or both, in the State of Florida.*

1. The name of the Limited Liability Company is: Diversified Healthcare Systems, LLC
2. The mailing address of the Limited Liability Company is: .
401 West Palm Drive
Suite 5
Florida City, FL 33034
3. Date of filing/registration in Florida: October 22, 2003 4. Document Number: L03000040504
- 5 The name of the Registered Agent and the Registered Office address as shown on the records of the
Florida Department of State:

Doris Bigus
12725 SW 62 Terrace
Miami, FL 33183

6. The name and address of the new Registered Agent and/or Office:

Doris Bigus
12725 SW 62 Terrace
Miami, FL 33183

If the Limited Liability Company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the Registered Office and the business office of the Registered Agent will be identical. Or, in the case of a Florida Limited Liability Company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the Limited Liability Company or as otherwise provided in the articles of organization or the operating agreement of the Limited Liability Company.

Doris Bigus
(Signature of a member or authorized representative of a member)

Doris Bigus
(Printed or typed name of Signee)

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.

Doris Bigus
(Signature of Registered Agent)

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