

L040000008765

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

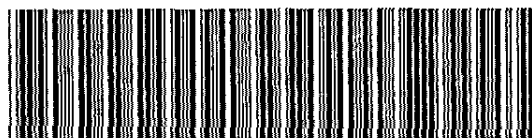
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
07 MAR - 1 AM 11:43

J. BRYAN MAR - 2 2007.



February 27, 2007

Florida Secretary of State
Corporate Filing Division
P.O. Box 6327
Tallahassee, FL 32314

Re: Phoenix Healthcare Billing, LLC (L04000008765)

Dear Ms. Secretary:

We are enclosing *Articles of Amendment* for the above-named entity along with a check in the amount of \$55.00 in payment of the filing fee and one certified copy. Please file and return certified copy to me at:

2828 Croasdaile Drive
Durham, NC 27705

Do not hesitate to contact me if you need any additional information or there are any questions regarding the enclosed. Thank you for your prompt attention to this matter.

Yours very truly,
PHOENIX PHYSICIANS, LLC

A handwritten signature in black ink, appearing to read 'Joann W. Anderson'.

Joann W. Anderson
Paralegal

Enclosures

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DIVISION OF CORPORATIONS
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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Phoenix Healthcare Billing, 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:

Joann W. Anderson
(Name of Person)

Phoenix Physicians
(Firm/Company)

2828 Croasdaile Drive
(Address)

Durham, NC 27705
(City/State and Zip Code)

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For further information concerning this matter, please call:

Joann W. Anderson at (919) 425-1500
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- | | | | |
|---|--|---|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input checked="" type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Phoenix Healthcare Billing, LLC

(Present Name)
(A Florida Limited Liability Company)

FIRST: The Articles of Organization were filed on 02-02-04 and assigned document number L04000008765

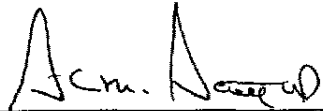
SECOND: This amendment is submitted to amend the following:

Article 1 of the Articles of Organization shall be amended to read as follows:

1. The name of the limited liability company is Physician Healthcare Billing, LLC.

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
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Dated February 21, 2007



Signature of a member or authorized representative of a member

Steven M. Scott, M.D., Manager of Phoenix Physicians, LLC, Member

Typed or printed name of signee

Filing Fee: \$25.00