

L040000 49973

(Requestor's Name)

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(City/State/Zip/Phone #)

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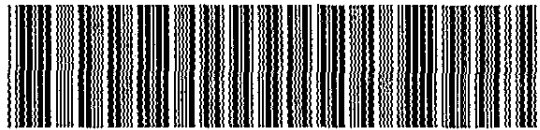
(Business Entity Name)

(Document Number)

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## TRANSMITTAL LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Florida Neuropsychological Associates, 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:

Daniel McLaughlin  
(Name of Person)

Law Offices of Dan McLaughlin  
(Firm/Company)

950 S. Pine Island Rd. Suite 150A  
(Address)

Plantation, Florida 33324  
(City/State and Zip Code)

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For further information concerning this matter, please call:

Dan McLaughlin  
(Name of Person)

at ( 954 ) 727-8134  
(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)

CK # 2455

**STREET ADDRESS:**  
Registration Section  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, Florida 32399

**MAILING ADDRESS:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

Florida Neuropsychological Associates, LLC.

(Present Name)  
(A Florida Limited Liability Company)

FIRST: The Articles of Organization were filed on 7/6/2004 and assigned  
document number LD4000049973

SECOND: The following amendment(s) to the Articles of Organization was/were adopted by the limited  
liability company:

Name change because of typo

New name should read:

Florida Neuropsychological Associates, LLC.

Dated August 2, 2004

Shelia R. Cassidy

Signature of a member or authorized representative of a member

Shelia R. Cassidy

Typed or printed name of signee

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