

# L040000 86451

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

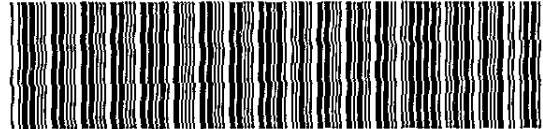
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TALLAHASSEE, FLORIDA

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## TRANSMITTAL LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** North East Creative Services 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:

Maisha Gibson  
(Name of Person)

McGuireWoods, LLP  
(Firm/Company)

77 West Wacker Drive, Suite 4100  
(Address)

Chicago, IL 60601  
(City/State and Zip Code)

For further information concerning this matter, please call:

Maisha Gibson at ( 312 ) 750-8671  
(Name of Person) (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 &  
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(additional copy is enclosed)

☐ \$60.00 Filing Fee,  
Certificate of Status &  
Certified Copy  
(additional copy is enclosed)

**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

2005 APR 12 P 3 45  
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TALLAHASSEE, FLORIDA

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

North East Creative Services LLC

(Present Name)  
(A Florida Limited Liability Company)

**FIRST:** The Articles of Organization were filed on December 1, 2004 and assigned document number L04000086451

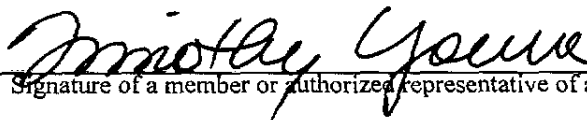
**SECOND:** The following amendment(s) to the Articles of Organization was/were adopted by the limited liability company:

Article I - The Name of the Limited Liability Company is hereby amended to:

Dialysis Services of Central Florida, LLC

**FILED**  
2005 APR 12 P 3:45  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Dated April 5, 2005



Signature of a member or authorized representative of a member

Timothy Youell, M.D.

Typed or printed name of signee

**Filing Fee: \$25.00**