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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : CLARK, PARTINGTON, HART AND HART

Account Number : 071201002016 Phone : (850)434-9200

Fax Number : (850)432-7340

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ECRETARY OF STATE LAHASSEE, FLORIDA

# LLÇ AMND/RESTATE/CORRECT OR M/MG RESIGN

## CANCER SERVICES OF WEST FLORIDA, LLC

Certificate of Status	0
Certified Copy	I
, age Count	02
Estimated Charge	\$55.00

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H07000260736 3

#### **COVER LETTER**

TO: Registration Section Division of Corporations

SUBJECT: CANCER SERVICES OF WEST FLORIDA, 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:

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Funda ( 1)
ESFLOR ST
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For further information concerning this matter, please call:

GARY W. HUSTON

(Name of Person)

at ( 850 ) 434-9200 (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

S25.00 Filing Fee

**■\$30.00** Filing Fee & Certificate of Status \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

Registration Socition 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

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

# CANCER SERVICES OF WEST FLORIDA, LLC (Present Name) (A Florida Limited Liability Company)

FIRST:	The Articles of Organization were filed on December 14, 2004 and assigned document number L 04000090441		
SECOND:	This amendment is submitted to amend the following:		
	ARTICLE 1 (NAME)		
	Article 1 is hereby amended as follows: The name of the limited liability company		
	is WEST FLORIDA CANCER SERVICES, LLC.		
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	D.F. A	Ġ	
Dated OC	tober 22 , 2007		
	Farry W. Hustin		
	( lignature of a member or authorized representative of a member		
	Gary W. Huston, authorized agent of a Member		
	Typed or printed name of signee		

Filing Fee: \$25.00