

W05000021273

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

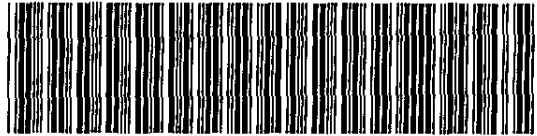
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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04/20/05 11:17:21
CLERK: [illegible]

W05-21273
ae

Direct Pharmacy, Inc.

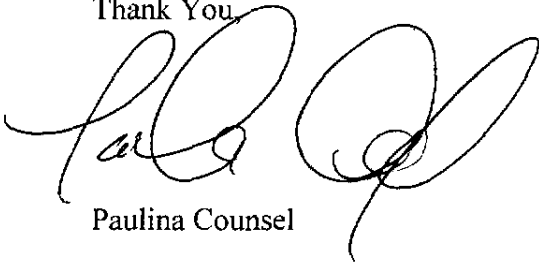
1033 SR 436 Ste. 201, Casselberry FL 32707 Phone: 1-888-855-7455 Fax: 1-888-855-7456

April 6, 2005

Division of Corporations
Registration Section
409 East Gaines Street
Tallahassee, FL 32399

If you have any questions regarding these requests I can be reached at 407-339-8113 ext. 310.

Thank You,

A handwritten signature in black ink, appearing to read 'Paulina Counsel', with a large, stylized flourish at the end.

Paulina Counsel

APR 20 PM 3:31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Gentlelase
(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:

Paulina Counsel
(Name of Person)

Direct Pharmacy
(Firm/Company)

1033 SR 436 H 201
(Address)

Casselberry, FL 32707
(City/State and Zip Code)

For further information concerning this matter, please call:

Paulina Counsel at (407) 339-8113
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- | | | | |
|---|---|--|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input checked="" type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input 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) |
|---|---|--|--|

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

Gentlelase

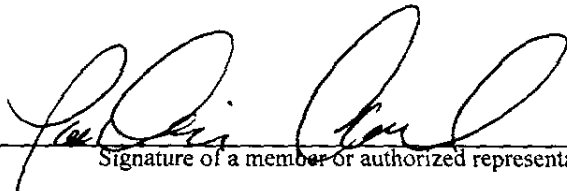
(Present Name)
(A Florida Limited Liability Company)

FIRST: The Articles of Organization were filed on 3.3.05 and assigned document number LO5000021273.

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

Please add "Rachel Mc Murtreay" to the list of owners for this company.

Dated 4.6.05, 2005.



Signature of a member or authorized representative of a member

Paulina Counsel

Typed or printed name of signee

2005 APR 20 PM 12:31
SECRETARY OF STATE
TALLAHASSEE FLORIDA

Filing Fee: \$25.00

Direct Pharmacy, Inc.

1033 SR 436 Ste. 201, Casselberry FL 32707 Phone: 1-888-855-7455 Fax: 1-888-855-7456

April 6, 2005

I, Rachel McMurtrey, am familiar with and knowingly accept the position of owner of Gentlelase Clinics, LLC. Please add my name to the list of owners.

Thank You,

A handwritten signature in black ink that reads "Rachel McMurtrey". The signature is written in a cursive, flowing style.

Rachel McMurtrey

2005 APR 20 PM 12:31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA