

LOS000048512

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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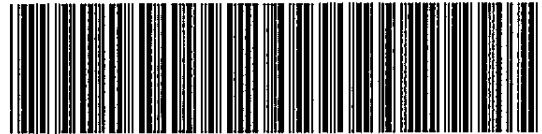
DCC

Acknowledgment

DCC

W. P. Verifier

DCC



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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Specialized Physical Therapy, LLC
(Name of Limited Liability Company)

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Lisa Ratcliffe
(Name of Person)

Specialized Physical Therapy
(Firm/Company)

6815 14th St West, Suite 203
(Address)

Bradenton, FL 34207
(City/State and Zip Code)

For further information concerning this matter, please call:

Lisa Ratcliffe at (941) 752-6566
(Name of Person) (Area Code & Daytime Telephone Number)

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

Specialized Physical Therapy, LLC
(Present Name)
(A Florida Limited Liability Company)

FIRST: The Articles of Organization were filed on 5/16/05 and assigned
document number L 05000048512

SECOND: This amendment is submitted to amend the following:

My partner Mary Lou Visser
50% owner has resigned from
Specialized Physical Therapy LLC.
My new partner 50% owner
is Frederick Ray Ratchliffe

Dated 11-14-2005, 2005

Lisa K. Ratchliffe
Signature of a member or authorized representative of a member

Lisa K. Ratchliffe
Typed or printed name of signer