

L05000053220

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

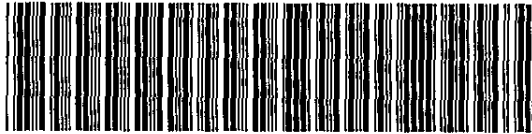
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EXPRESS CORPORATE FILING SERVICE INC.

Requestor's Name

1000 PONCE DE LEON BLVD. SUITE:101

Address

CORAL GABLES, FL 33134 (305) 444-4994

City/State/Zip

Phone #

OFFICE USE ONLY

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. Family Plus Medical & Rehabilitation Center, LLC.
(Corporation Name) (Document #) L05000053220

2. _____
(Corporation Name) (Document #)

3. _____
(Corporation Name) (Document #)

4. _____
(Corporation Name) (Document #)

☐ Walk in

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☐ Certified Copy

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☐ Will wait

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NEW FILINGS

☐	Profit
☐	NonProfit
☐	Limited Liability
☐	Domestication
☐	Other

AMENDMENTS

☒	Amendment
☐	Resignation of R.A., Officer/ Director
☐	Change of Registered Agent
☐	Dissolution/Withdrawal
☐	Merger

OTHER FILINGS

☐	Annual Report
☐	Fictitious Name
☐	Name Reservation

REGISTRATION/
QUALIFICATION

☐	Foreign
☐	Limited Partnership
☐	Reinstatement
☐	Trademark
☐	Other

Examiner's Initials

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

Family Plus Medical & Rehabilitation Center, LLC.

(Present Name)
(A Florida Limited Liability Company)

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TALLAHASSEE, FLORIDA

FIRST: The Articles of Organization were filed on 05/27/2005 and assigned document number L05000053220.

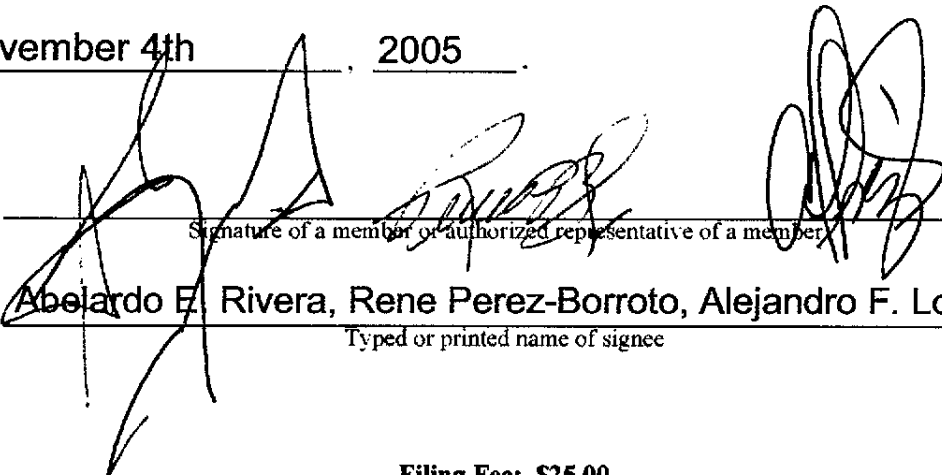
SECOND: This amendment is submitted to amend the following:

The Manager Member Detail should Read as Follows:

Jose Noel Chirino (Mgrm)

5040 N.W. 7th Street - Suite #450 - Miami, FL 33126

Dated November 4th, 2005.



Signature of a member or authorized representative of a member.

Abelardo E. Rivera, Rene Perez-Borroto, Alejandro F. Lopez

Typed or printed name of signee

Filing Fee: \$25.00