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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

NRC

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: PAIN RELIEF MANAGEMENT GROUP 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:

CALVIN HARRISON

(Name of Person)

(Firm/Company)

P O BOX 292456

(Address)

DAVIE, FLORIDA 33329

(City/State and Zip Code)

For further information concerning this matter, please call:

LEONA J RAY

(Name of Person)

at (954) 792-0363

(Area Code & Daytime Telephone Number)

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☒ \$60.00 Filing Fee,
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(additional copy is enclosed)

MAILING ADDRESS:

Registration Section
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

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

PAIN RELIEF MANAGEMENT GROUP, LLC

(Present Name)
(A Florida Limited Liability Company)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FIRST: The Articles of Organization were filed on JULY 5, 2005 and assigned document number L05000065767.

SECOND: This amendment is submitted to amend the following:

ARTICLE VII - MANAGERS OF LLC

ADD TITLE, NAME AND ADDRESS OF THE FOLLOWING:

MANAGER -

MARY HARRISON

1161 NW 99TH AVENUE

PLANTATION, FLORIDA 33322

Dated MAY 2, 2007.



Signature of a member or authorized representative of a member

CALVIN HARRISON

Typed or printed name of signee

Filing Fee: \$25.00