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L05000069340

Florida Department of State
Division of Corporations
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888 MEDICAL CENTER, LLC

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S. HAWKES
AUG 25 2009
EXAMINER

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H09000187737

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF888 MEDICAL CENTER LLC
(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)The Articles of Organization for this Limited Liability Company were filed on 7/14/2005 and assigned
Florida document number L05000069340

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

MARTHA SUSANA LAPETINICH

New Registered Office Address:

888 NW 27 AVE #6

(Enter Florida street address)

Miami

(City)

Florida

33125

(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

(If Changing Registered Agent, Signature of New Registered Agent)

H09000187737

FROM : 1-22ARUS

FAX NO. : 3052201440

Aug. 24 2009 02:17PM P3

H09000187737

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

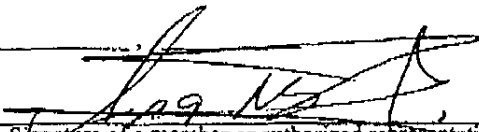
MGRM = Managing Member

| Title | Name | Address | Type of Action |
|-------|--------------------------|---------------------------------------|--|
| MGRM | ANA MARIA SOLIVAN | | <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove |
| MGRM | MARTHA SUSANA KAPETINICH | 988 NW 27 AVE #6 MIAMI FL 33125 | <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Add <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Add <input type="checkbox"/> Remove |
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| | | | <input type="checkbox"/> Add <input type="checkbox"/> Remove |

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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Dated _____



Signature of a member or authorized representative of a member

ANA MARIA SOLIVAN

Typed or printed name of signee

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