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2005 NOV 11 P 1:19

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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(Business Entity Name)

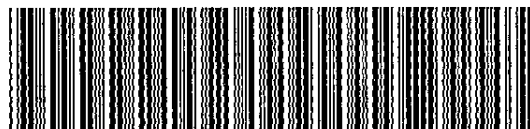
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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Worker's Health, LLC
(Name of Limited Liability Company)

FILED
2005 NOV 14 P 1:49
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Larry W. Mayfield
(Name of Person)

Workers' Health, LLC
(Firm/Company)

1109 SW 10th Street
(Address)

Ocala, FL 34474
(City/State and Zip Code)

For further information concerning this matter, please call:

Larry W. Mayfield at (352) 629-3455
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☐ \$25.00 Filing Fee

☒ \$30.00 Filing Fee &
Certificate of Status

☐ \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(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

FILED

Worker's Health, LLC

(Present Name)
(A Florida Limited Liability Company)

2005 NOV 14 P 1:49
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FIRST: The Articles of Organization were filed on November 8, 2005 and assigned
document number L05000108447

SECOND: This amendment is submitted to amend the following:

To correct the an error on the filed name of Worker's Health, LLC
to the desired corrected name of Workers' Health, LLC

Dated November 9, 2005



Signature of a member or authorized representative of a member

Larry W. Mayfield, Authorized Representative

Typed or printed name of signee

Filing Fee: \$25.00