L05000123456

(Requestor's Name)	
(Address)	
(Address)	<u>.</u>
(City/State/Zip/Phone #)	
PICK-UP WAIT	MAIL
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Statu	s
Special Instructions to Filing Officer:	
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J. SAULSBERRY EXAMINER AUG 8 2011

COVER LETTER

Division of Corpo					
SUBJECT: Decomp	oression & Rehabi	litation of Southw	est Florida, LLC		
SOBOBET.		ited Liability Company			
The enclosed Articles of A	mendment and fee(s) are sub	omitted for filing.			
Please return all correspond	dence concerning this matter	to the following:			
		James H. Siesky		<u>-</u>	
		Name of Person			
Siesky, Pilon & Potter					
Firm/Company		-			
	242	E Toméh Cé Ní Cuita	202		
3435 Tenth St. N., Suite 303 Address			-		
		Naples, FL 34103		_	
		City/State and Zip Code		,	
		siesky@spplaw.com	1	NA SE	
<u>.</u> :	·	to be used for future annual re	eport notification)	CA!	<u></u>
For further information con	cerning this matter, please of	eall:		2011 AUG -5 SECRETARY	1
.lame	s H. Siesky	at (239)	263-8282 ext 301	SEE	
Name of F			& Daytime Telephone Numbe		FILED
Enclosed is a check for the	following amount:			\$ \frac{1}{2}	
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is	Certifica	ate of Status &	

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

(additional copy is enclosed)

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Decompression & Rehabilitation of Southwest Florida, 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 12/29/2005 and assigned L05000123456 Florida document number This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Decompression and Spinal Rehabilitation of SW Florida, LLC 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, enterthe name of the new registered agent and/or the new registered office address here: James H. Siesky Name of New Registered Agent: 3435 Tenth St. N., Suite 303 New Registered Office Address:

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 finited liability company has been notified in writing of this change.

Naples City

If Changing Registered Agent, Signature of New Registered Agent

Enter Florida street address

Page 1 of 2

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 Name <u>Address</u> Type of Action Timothy Jon Jackoboice 1415 Panther Lane, Ste 313 ✓ Add Naples, FL 34109 Remove ☐ Add ☐ Remove ☐ Remove Remove ∏Add Remove $\prod Add$ Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) August 2 2011 Dated ___ Signature of a member or authorized representative of a member Edward O'Neill, Managing Member Typed or printed name of signee

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Filing Fee: \$25.00