

LOG 0000 11559

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

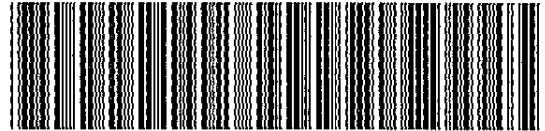
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



500065340075

02/09/06--01043--005 \*\*30.00

06 FEB -9 PM 2:47  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

2/16  
[Signature]

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: SURGIVENTER OF SOUTH FLORIDA, 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:

Todd Weprin

(Name of Person)

BSW PLC

(Firm/Company)

3200 N. Military Trail, # 200

(Address)

Boca Raton, FL 33431

(City/State and Zip Code)

FILED  
06 FEB -9 PM 2:47  
SEC. OF STATE  
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Todd Weprin

(Name of Person)

at ( 561 ) 997-5700

(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**

SURGIVENTER OF SOUTH FLORIDA, LLC

(Present Name)  
(A Florida Limited Liability Company)

**FIRST:** The Articles of Organization were filed on February 1, 2006 and assigned document number L06000011559.

**SECOND:** This amendment is submitted to amend the following:

The name of the Limited Liability Company is:

"SURGICENTER OF SOUTH FLORIDA, LLC"

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Dated February 2, 2006

\_\_\_\_\_  
Signature of a member or authorized representative of a member

Todd Weprin

\_\_\_\_\_  
Typed or printed name of signee

FILED  
06 FEB -9 PM 2:47  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

Filing Fee: \$25.00