

LOG000024852

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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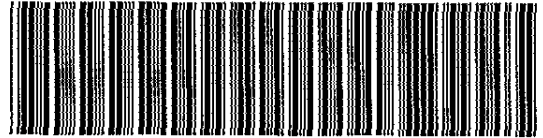
(Business Entity Name)

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DIVISION OF CORPORATION

LOG-24852
R

CORPDIRECT AGENTS, INC. (formerly CCRS)
515 EAST PARK AVENUE
TALLAHASSEE, FL 32301
222-1173

FILING COVER SHEET
ACCT. #FCA-14

CONTACT: TRACY SPEAR

DATE: 03/30/06

REF. #: 000937.49923

CORP. NAME: OTHOTIC AND PROSTHETIC CENTER OF MELBOURNE, LLC

- | | | |
|--|---|--|
| <input type="checkbox"/> ARTICLES OF INCORPORATION | <input checked="" type="checkbox"/> ARTICLES OF AMENDMENT | <input type="checkbox"/> ARTICLES OF DISSOLUTION |
| <input type="checkbox"/> ANNUAL REPORT | <input type="checkbox"/> TRADEMARK/SERVICE MARK | <input type="checkbox"/> FICTITIOUS NAME |
| <input type="checkbox"/> FOREIGN QUALIFICATION | <input type="checkbox"/> LIMITED PARTNERSHIP | <input type="checkbox"/> LIMITED LIABILITY |
| <input type="checkbox"/> REINSTATEMENT | <input type="checkbox"/> MERGER | <input type="checkbox"/> WITHDRAWAL |
| <input type="checkbox"/> CERTIFICATE OF CANCELLATION | | |
| <input type="checkbox"/> OTHER: | | |
- SECRETARY OF STATE
TALLAHASSEE, FL 32301
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STATE FEES PREPAID WITH CHECK# 5110625 FOR \$ 55.00

AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED:

_____ COST LIMIT: \$ _____

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- | | | |
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| <input checked="" type="checkbox"/> CERTIFIED COPY | <input type="checkbox"/> CERTIFICATE OF GOOD STANDING | <input type="checkbox"/> PLAIN STAMPED COPY |
| <input type="checkbox"/> CERTIFICATE OF STATUS | | |

Examiner's Initials

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF
ORTHOTIC AND PROSTHETIC CENTER OF MELBOURNE, LLC
A Florida Limited Liability Company**

ARTICLE IV - Management

FIRST: The Articles of Organization were filed on March 8, 2006 and assigned document #L06000024852.

SECOND: The Company is to be managed by the member and the name and address of the initial co-managers are:

**JAMES TIERNEY and ARIANE ST. CLAIRE
One Southeast Third Avenue-Suite 1940
Miami, Florida 33131**

DATED: This 30th day of March, 2006.



SALVADOR C. ORONO, Authorized Representative

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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