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CORPORATION NAME (S) AND DOCUMENT NUMBER (S):

Pain Management and Diagnostic Center, LLC

	Filing Evidence		Type of Document
	☑ Plain/Confirmation Cop	рy	Type of Document Certificate of Status
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	Non Profit		Resignation of RA Officer/Director
	Limited Liability		Change of Registered Agent
	Domestication		Dissolution/Withdrawal
	Other		Merger
	OTHER FILINGS		REGISTRATION/QUALIFICATION
	Annual Reports	1	Foreign

Limited Liability

Reinstatement

Trademark

Other



July 18, 2006

UCC FILING & SEARCH

TALLAHASSEE, FL

SUBJECT: CAROLINE C. HONCULADA M.D., LLC

Ref. Number: L06000030719

We have received your document for CAROLINE C. HONCULADA M.D., LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please note that we have RETAINED your \$25.00 filing.

Please note that the articles cannot have an effective date prior to the date of filing.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6914.

Letter Number: 506A00045849

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THE DAY OF ST Amended and Restated Articles of Organizatio of

Caroline C. Honculada M.D., LLC, a Florida Limited Liability Company

(Filed in accordance with 608.411, F.S.)

THIS IS TO CERTIFY THAT:

This Amended and Restated Articles of Organization amends and restates the FIRST:

Articles of Organization of Caroline C. Honeulada M.D., L.L.C., a Florida Limited

Liability Company.

SECOND: The date of filing of the Articles of Organization was March 23, 2006.

The Articles of Organization of Caroline C. Honeulada M.D., LLC are hereby THIRD:

amended and restated as follows:

Article I

The name of the Florida Limited Liability Company is Caroline C. Honculada M.D., LLC.

Article II

The mailing address and street address of the principal office of the Limited Liability Company is 421 Linden Lane, Lake Wales, FL 33853.

Article III

The purpose for which this Limited Liability Company is organized is any and all lawful business. Notwithstanding, to the extent the business of the LLC is to provide medical services of any kind or nature, only physicians licensed by the State of Florida will engage in the diagnosis and treatment of disease, injury, or other physical or mental condition and that the entity shall neither exercise control over, nor interfere with, the physician-patient relationship.

Article IV

The name of the registered agent is Caroline C. Honculada and whose Florida street address is 421 Linden Lane, Lake Wales, FL 33853.

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this vertificate, 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 relating 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, Florida Statutes.

Registered Agent Signature

Article V

Caroline C. Honculada, Manager