

L06000080687

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

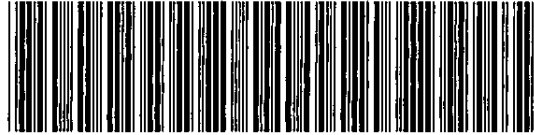
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



500111346945

11/02/07--01045--005 **60.00

AL
FILED
2007 NOV -2 P 3:39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: The Island Clinic of Key Biscayne, 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:

Carmen J. Ortiz-Butcher, M.D.
(Name of Person)

~~The Island Clinic of Key Biscayne, LLC~~
(Firm/Company)

967 Crandon Blvd
(Address)

Key Biscayne, Florida 33149
(City/State and Zip Code)

2001 NOV - 2 P 3: 39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

For further information concerning this matter, please call:

Carmen J. Ortiz-Butcher, M.D. at (786) 546-4465
(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**

The Island Clinic of Key Biscayne, LLC

(Present Name)
(A Florida Limited Liability Company)

FIRST: The Articles of Organization were filed on 8/16/06 and assigned
document number L06000080687.

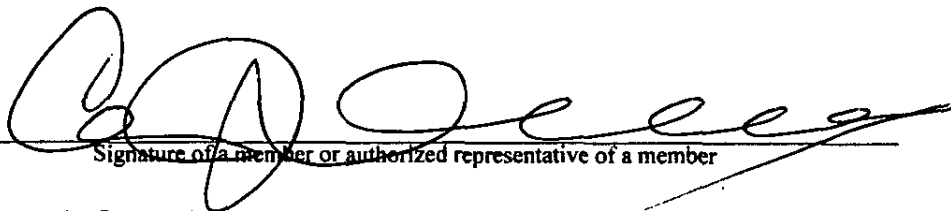
SECOND: This amendment is submitted to amend the following:

Change Entity Name from The Island Clinic of Key Biscayne, LLC
to Island Clinic of Key Biscayne, LLC

2007 NOV - 2 P 3:39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

Dated November 1st, 2007.



Signature of a member or authorized representative of a member

Carmen J. Ortiz-Butcher, M.D.

Typed or printed name of signee

Filing Fee: \$25.00