

L06000083430

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

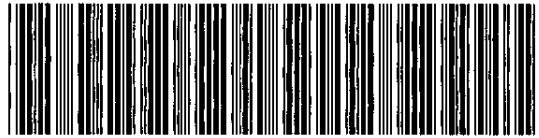
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

T. HAMPTON

OCT 30 2008

EXAMINER

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT: Physician's Marketing and Management, L.L.C.**  
(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:

Edward B. Cohen, Esquire

(Name of Person)

Schwartz Gold Cohen Zakarin & Kotler, PA

(Firm/Company)

54 SW Boca Raton Boulevard

(Address)

Boca Raton, FL 33432

(City/State and Zip Code)

For further information concerning this matter, please call:

Edward B. Cohen, Esquire

(Name of Person)

at ( 561 ) 361-9600

(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

EDWARD B. COHEN  
MICHAEL I. KOTLER •  
ALLAN H. SCHWARTZ  
RONALD M. ZAKARIN ••

• ALSO ADMITTED IN  
DISTRICT OF COLUMBIA  
AND PENNSYLVANIA

•• ALSO ADMITTED IN  
DISTRICT OF COLUMBIA  
AND NEW YORK

LAW OFFICES  
SCHWARTZ, GOLD, COHEN, ZAKARIN & KOTLER, P.A.  
ATTORNEYS AT LAW  
54 S.W. BOCA RATON BOULEVARD, BOCA RATON, FLORIDA 33432  
TELEPHONE: 561-361-9600 FACSIMILE: 561-361-9770  
WEBSITE: SGCZKLAW.COM

ESTABLISHED 1984

DAVID C. KOTLER  
JOHN E. KOPF  
PAULA GOLD (RETIRED)

October 28, 2008

**Via Federal Express 7906 1451 7672**

Registration Section  
Division of Corporations  
2661 W. Executive Center Circle  
Clifton Building  
Tallahassee, FL 32301-5020

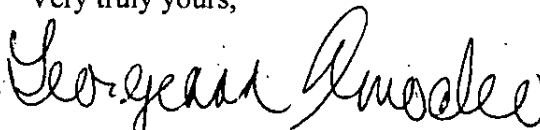
Re: **Cover Letters and Articles of Amendment to Articles of Organization for:  
Physician's Surgical Group, L.L.C.  
Expert Billing, L.L.C.  
Physician's Marketing and Management, L.L.C.  
Our File Number 4-1618-1**

Dear Sir/Madam:

Enclosed are original Cover Letters and Articles of Amendment to Articles of Organization together with our law firm's check in the amount of Seventy-Five Dollars (\$75.00) representing the filing fee for the three (3) above-referenced Limited Liability Companies. Please forward copies of the Amendments to our office as soon as possible.

Thank you for your assistance with this matter.

Very truly yours,



Georgeann Amodeo  
Legal Assistant

/gla  
Enclosures



**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

PHYSICIAN'S MARKETING AND MANAGEMENT, L.L.C.

(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 August 23, 2006 and assigned  
Florida document number L06000083430.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

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)

c/o Physicians Surgical Group, L

40 SE 5th Street, Suite 406

Boca Raton, FL 33432

**Enter new mailing address, if applicable:**

(Mailing address MAY BE A POST OFFICE BOX)

c/o Physicians Surgical Group, L

40 SE 5th Street, Suite 406

Boca Raton, FL 33432

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent:

Edward B. Cohen, Esquire

New Registered Office Address:

54 SW Boca Raton Boulevard

(Enter Florida street address)

Boca Raton

(City)

Florida 33432

(Zip Code)

**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 limited liability company has been notified in writing of this change.*

  
(If Changing Registered Agent, Signature of New Registered Agent)

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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
Pres	David Dorfman	9291 Nugent Trail West Palm Beach, FL 33411	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
VP	Carol Via	9291 Nugent Trail West Palm Beach, FL 33411	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	Carol Via	c/o Physicians Surgical Group, LLC 40 SE 5th Street, Suite 406 Boca Raton, FL 33432	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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

2008 OCT 29 A 11:49  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

Dated October 28, 2008

*Carol Via*

Signature of a member or authorized representative of a member

Carol Via, Managing Member/President

Typed or printed name of signee