

L06000111228

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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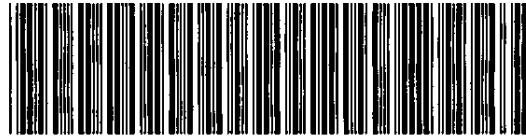
(Business Entity Name)

(Document Number)

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DEAN
LAW FIRM | L L C

SUITE 300
230 NE 25TH AVENUE
OCALA, FL 34470-7075
TELEPHONE 352.387.8700
FACSIMILE 800.251.9424

Timothy S. Dean, P.A.
tim@deanfirm.com

October 7, 2013

VIA FEDERAL EXPRESS

Florida Division of Corporations
Attn: Amendments
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Re: Franck's 2, LLC – Amendment to Articles of Organization
Document Number: L06000111228

To Whom it may Concern:

Enclosed please find the following:

- 1.) Articles of Amendment to Articles of Organization of Franck's 2, LLC
- 2.) Copy for certification. Please return copy to our attention; and
- 3.) Check in the amount of \$55.00, which represents payment for same,

Please do not hesitate to call if you have any questions.

Thank you in advance for your courtesies.

Sincerely yours,

DEAN LAW FIRM, LLC


Christi G. Jacquay
Legal Assistant

13 OCT - 9 AM 10:43
FEDERAL EXPRESS
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**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Franck's 2, LLC

(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 November 16, 2006 and assigned
Florida document number L06000111228.

This amendment is submitted to amend the following:

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

Trinity Care Solutions, LLC

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)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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:

New Registered Office Address:

Enter Florida street address

, Florida

City

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

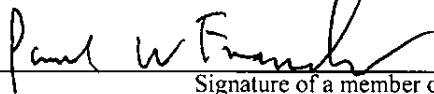
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	Paul W. Franck Revocable Trust	202 SW 17th Street	<input type="checkbox"/> Add
		Ocala, FL 34471	<input checked="" type="checkbox"/> Remove
MGRM	Paul W. Franck	202 SW 17th Street	<input checked="" type="checkbox"/> Add
		Ocala, FL 34471	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Dated October 7, 2013



Signature of a member or authorized representative of a member

Paul W. Franck

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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