

LO7000004438

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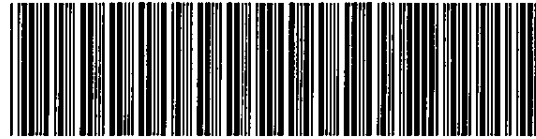
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## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** SYNERGY OF MIAMI, 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:

GUSTAVO MARSHALL, DC

(Name of Person)

SYNERGY OF MIAMI, LLC

(Firm/Company)

275 NE 18 Street #CU 10B

(Address)

MIAMI, FL 33132

(City/State and Zip Code)

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For further information concerning this matter, please call:

GUSTAVO MARSHALL, DC at ( 305 ) 559-7118  
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

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Certificate of Status

☐ \$55.00 Filing Fee &  
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(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**

**SYNERGY OF MIAMI, LLC**

(Present Name)  
(A Florida Limited Liability Company)

**FIRST:** The Articles of Organization were filed on 1/11/2007 and assigned document number L07000004438.

**SECOND:** This amendment is submitted to amend the following:

THE NAME SYNERGY OF MIAMI, LLC SHALL CHANGE TO  
SYNERGY WELLNESS CLINIC, LLC

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Dated MARCH 1, 2007.

  
Signature of a member or authorized representative of a member

**GUSTAVO MARSHALL**

Typed or printed name of signee

**Filing Fee: \$25.00**