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**TO: Registration Section
Division of Corporations**

SUBJECT: a-regalcare companion and caregiver services 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:

DR. MARIA DOHERTY.MD.LLC

(Name of Person)

A-REGALCARE COMPANION AND CAREGIVER

(Firm/Company)

14089 HIGHGROVE RD.

(Address)

SPRINGHILL,FLORIDA 34609

(City/State and Zip Code)

For further information concerning this matter, please call:

DR.MARIA DOHERTY

(Name of Person)

at (**813**) **453-2219**

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☐ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &
Certificate of Status

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☒ \$60.00 Filing Fee,
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(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

FILED
07 AUG -6 PM 12:31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

A-REGALCARE COMPANION AND CAREGIVER SERVICES LLC

(Present Name)
(A Florida Limited Liability Company)

FIRST: The Articles of Organization were filed on MARCH 20, 2007 and assigned
document number L07000030147.

SECOND: This amendment is submitted to amend the following:

CLOVIS CAYUNDA name to be removed

Dated AUGUST 2, 2007



Signature of a member or authorized representative of a member

DR.MARIA DOHERTY.MD

Typed or printed name of signee

Filing Fee: \$25.00