

**L07000043100**

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

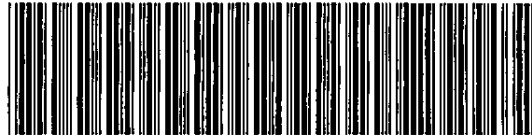
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



**500104102515**

06/11/07--01023--021 \*\*25.00

**FILED**  
**07 JUN 11 AM 11:30**  
**SECRETARY OF STATE**  
**TALLAHASSEE, FLORIDA**

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: The Diabetic Place, 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:

Shawna Charles, ARNP  
(Name of Person)

The Diabetic Place  
(Firm/Company)

7900 NW 33<sup>rd</sup> St Suite 104  
(Address)

Davie, FL 33024  
(City/State and Zip Code)

For further information concerning this matter, please call:

Shawna Charles at 954 665-9670  
(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 Diabetic Place, LLC

(Present Name)  
(A Florida Limited Liability Company)

FIRST: The Articles of Organization were filed on  
document number LO7000043100

4/23/07 and assigned 6/11/07

SECOND: This amendment is submitted to amend the following:

Please change:

- ① Principal Address to 7900 NW 33<sup>rd</sup> St / Suite 104  
② Mailing Address to Davie, FL 33024

~~③~~ Please Add:

- ③ Registered Agent as SV Charles  
④ Managing Member 7900 NW 33<sup>rd</sup> St  
Suite 104  
Davie, FL 33024

Dated

6/13/07



Signature of a member or authorized representative of a member

Shawna V. Charles

Typed or printed name of signee

FILED  
07 JUN 11 AM 11:30  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA