Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H08000231853 3)))



H080002318533ABC/

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : INCORPORATETIME.COM, INC.

Account Number: I19990000221 Phone : (631)589-5552 Fax Number

: (631)589-2848



AMND/RESTATE/CORRECT OR M/MG RESIGN

PRIMARY CARE ASSOCIATES OF FLORIDA LLC

Certificate of Status	. 0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

Electronic Filing Menu

Corporate Filing Menu

Help

HO80002318533 ARTICLES OF AMENDMENT

TO ARTICLES OF AVIENDMENT TO ARTICLES OF ORGANIZATION OF

Primary Care Associates of Florida LLC

FILED

2008 OCT -8 AM 9: 42

SECRETARY OF STATE TALLAHASSEE, FLORIDA

<u> </u>	(Present Name) (A Florida Limited Liability Company)		
FIRST:	The Articles of Organization were filed on document number L07000049465		
SECOND:	This amendment is submitted to amend the following:		
	ARTICLE II: The street address of the principal office of the Limited Liability Company is:		
	1403 Medical Plaza Drive, Suite 107 Sanford, Florida, 32771		
	The mailing address of the Limited Liability Company is: 1403 Medical Plaza Drive, Suite 107 Sanford, Florida, 32771 Article IV: The name and street address of the registered agent is: Alexandra Alexis,1403 Medical Drive, Suite 107 Sanford, Florida, 32771		
	Article V: The names and address of managing members are:		
	Eden's Valentin,1403 Medical Plaza Drive, Suite 107 Sanford, Florida, 32771		
	Alexandra Alexis,1403 Medical Plaza Drive, Sulte 107 Sanford, Florida, 32771		
Dated Se	ptember 24		
	Mexandra Alexan Signature of a member or authorized representative of a member		
	Alexandra Alexis, Member		
	Typed or printed name of signee		

H080003318 5333