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TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: INTEGRATED PAIN SOLUTIONS OF THE NORTHEAST, 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:

CHEYL ALEXIS
(Name of Person)

INTEGRATED PAIN SOLUTIONS, LLC
(Firm/Company)

1030 N. ORANGE AVE. STE 105
(Address)

ORLANDO, FL 32801
(City/State and Zip Code)

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For further information concerning this matter, please call:

CHEYL ALEXIS at (407) 367-0944
(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

INTEGRATED PAIN SOLUTIONS OF THE NORTHEAST, LLC

(Present Name)
(A Florida Limited Liability Company)

FIRST: The Articles of Organization were filed on JUNE 14, 2007 and assigned document number L07000063076.

SECOND: This amendment is submitted to amend the following:

THE NAME OF THE MANAGING MEMBER NEEDS
TO BE CHANGED FROM PAINCAKE, INC TO:
INTEGRATED PAIN SOLUTIONS, LLC

FILED
07 JUN 26 AM 10:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Dated JUNE 25, 2007.



Signature of a member or authorized representative of a member

ALBERT R. MEYER, ASST. SEC. PAINCAKE INC. MGRM FOR INTEGRATED
Typed or printed name of signee PAIN SOLUTIONS, LLC

Filing Fee: \$25.00