

LO70000 63101

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(City/State/Zip/Phone #)

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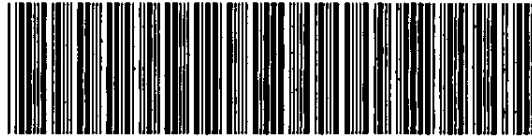
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: INTEGRATED PAIN SOLUTIONS OF THE SOUTHWEST, 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:

CHERYL 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)

FILED  
07 JUN 26 AM 11:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

CHERYL 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 SOUTHWEST, LLC

(Present Name)  
(A Florida Limited Liability Company)

FIRST: The Articles of Organization were filed on JUNE 15, 2007 and assigned document number L07000063101.

SECOND: This amendment is submitted to amend the following:

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

FILED  
07 JUN 26 AM 11:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Dated JUNE 25, 2007.



Signature of a member or authorized representative of a member

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

Filing Fee: \$25.00