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Account Name : OFFICE SOLUTIONS, INC. Account Number : 120060000028

Phone

: (850)450-9175

Fax Number

: (866)226-9858

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PANHANDLE LEGAL NURSE CONSULTANT LLC

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From: Laipin VanLandingham

Date: 09/26/2007 20:25:29 PST

3503 Andrew Ave, Pensacola, FL 32505

2001 SEP 27 AM 8: 3

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COVER LETTER.

TO: Registration Section Division of Corporations

SUBJECT: PANHANDLE LEGAL NURSE CONSULTANT 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:

			•	
	LAIPIN \	/ANLANDINGHAM		
	· ·	(Name of Person)		
	OFFICE	SOLUTIONS INC		
		(Firm/Company)		
	3503 AN	IDREW AVE		
		(Address)		
;	PENSA	COLA, FL 32505	je produktiva i se	
		(City/State and Zip Code)		As 5
For further information	concerning this matter, please	call:		ECRETA
LAIPIN VANLA	NDINGHAM	at (850, 450-91	75	HAS TAT
(Name	of Person)	(Area Code &:De	ytime Telephone Number)	35E 27 0
				12 S.
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\$25.00 Filing Fee	2\$30,00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy	Certificate of Status	

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MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Certified Copy

(additional copy is enclosed)

Registration Section Division of Corporations Clifton Building-2661 Executive Center Circle Tallahassee, FL 32301

Landick

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

PANHANDLE LEGAL NURSE CONSULTANT LLC (Present Name) (A Florida Limited Liability Company)

FIRST:	The Articles of Organization were filed on 09/24/2007 and assigned document number L07000097264	(\$%.	; *7t* ,	(c.t.) Hyski
SECOND:	This amendment is submitted to amend the following: The correct name of the LLC should be:	tion Biogenation The Guirer		
	PANHANDLE LEGAL NURSE CONSULTING LLC		7.88 (4.8%)	
	A CONTRACTOR OF THE CONTRACTOR			
	Mark Arthur Salan Mark Arthur		5	<u>.</u>
		SECRETARY OF STATE TALLAHASSEE FLIRIDA	2001 SEP 27 AM 8:	
Dated Se	ptember 26	ATE RIDA	39	
	Signature of almember or authorized representative of a member Margaret Holt Typed or printed name of signee			

Filing Fee: \$25.00