

**LD7000103257**

Florida Department of State  
Division of Corporations  
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**C. LEWIS**  
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3/25/2010 8:20:05 AM PAGE 1/001 Fax Server

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March 25, 2010

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

PSN PEDIATRIC OFFICE LLC  
17689 N.W. 78 AVENUE  
HIALEAH, FL 33015

SUBJECT: PSN PEDIATRIC OFFICE LLC  
REF: L07000103257

We have received your electronically transmitted document. However, the document was submitted under the wrong electronic filing type and cannot be processed by this office.

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Regulatory Specialist II  
Registration/Qualification Section

FAX Aud. #: B10000066652  
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FILED PAGE 03/04

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

2010 MAR 25 AM 8:11  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

PSN Pediatric Office, LLC

(Name of the Limited Liability Company as it now appears on our records)  
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 10-11-2007 and assigned  
Florida document number 107000103257.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

B&C Family Health Group and Associates, LLC  
The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation  
"L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

17689 NW 78 Ave

HiALEAH, FL 33015

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new  
registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

Florida

City

Zip Code

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

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If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member

Title	Name	Address	Type of Action
MGR	Alexis Ramirez	17689 NW 78 Ave Hialeah, FL 33015	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Dated

3-22-2010

Signature of a member or authorized representative of a member

Alexis Ramirez

Typed or printed name of signer

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