Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : GASSMAN & ASSOCIATES, P.A.

Account Number : 075350000514 Phone : (727)442-1200

: (727)443-5829 Fax Number

AMND/RESTATE/CORRECT OR M/MG RESIGN

MICHELLE SPUZA-MILORD, M.D., L.L.C.

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

J. BRYAN

MAR - 5 2008

EXAMINER

Electronic Filing Menu

Corporate Filing Menu

Help

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

		9	
		8 S ₀	
MICHELLE SPUZA-MILORD, I	M.D., L.L.C.		
(A Flor	pility Company as it now appears on our a ida Limited Liability Company)		
		1 TV	
The Articles of Organization for this Limited Liabili	ty Company were filed on November	1, 2007 and assigned 2	
Florida document number <u>L07000110793</u>		X Š	
		= = =	
This amendment is submitted to amend the followin	g:	1, 2007 and assigned ORPOR	
	.	•	
A. If amending name, enter the new name of the	limited liability company here:		
-			
ALLERGY & RHEUMATOLOGY ASSOCI			
The new name must be distinguishable and end with the "L.L.C."	words "Limited Liability Company." the d	esignation "DLC" or the appreviation	
B. If amonding the registered agent and/or re	egistered office address on our recor	ds, 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:		•	
New Registered Office Address.	(Enter Flori	da street address)	
	,		
-	(City)	Florida(Zip Code)	
	(3.19)	(_4, , _ , _ ,	
The state of the s	Accord Accords		
New Registered Agent's Signature, if changing Regis	tered Agent:		
I hereby accept the appointment as registered ag	eart and agrees to get in this conceits. I	firther amee to comply with	
the provisions of all statutes relative to the prope			
accept the obligations of my position as registere			
being filed to merely reflect a change in the regis			
company has been notified in writing of this char			
	(If Changing Registered Agent, Signate	ure of New Registered Agent)	

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 = Ma MGRM = M	asger lanaging Member		
<u>Title</u>	Name	Address	Type of Action
			Add Remove
			Add Remove
	470 (2.1.2)		Add Remove
			Add Remove
			OIVISION
			OF CORPORATIONS -L. **AMII: 09 Administrations
D. If amend	ling any other information, enter change(s) here: (Attach additional sheets, if necessary.)	TIONS
_			
Dated Marc	h 4 2008	· · · · · · · · · · · · · · · · · · ·	-
	Signature of a member of	r authorized representative of a member	
	Alan S. Gassman, as Authorized R	epresentative	
	Typea or	r printed name of signoc	

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Filing Fee: \$25.00