

FROM : LAZARUS
Division of Corporations

FAX NO. : 3052201440

May 13 2008 12:56 PM P1

W08000044025

Florida Department of State
Division of Corporations
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DADE FAMILY PROFESSIONAL SERVICES, LLC

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M. Thomas MAY 14 2008

5/13/2008 12:19 PM

H08000128134

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

DADE FAMILY PROFESSIONAL SERVICES, 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 05/22/2008 and assigned
Florida document number L08000044025

This amendment is submitted to amend the following:

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

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

2711 SW 137TH AVE STE 89

MIAMI, FL 33175

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

2711 SW 137TH AVE STE 89

MIAMI, FL 33175

**B. If amending the registered agent and/or registered office address on our records, enter the name of the
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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08 MAY 13 AM 9:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FROM : LAZARUS

FAX NO. : 3052201440

May. 13 2008 12:57PM P3

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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:

NIGR = Manager

NIGRM = Managing Member

Title	Name	Address	Type of Action
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove

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

Dated MAY 12, 2008

Signature of a member or authorized representative of a member

TATIANA BORREGO

Typed or printed name of signer

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TALLAHASSEE, FLORIDA

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