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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : PETER J. JAENSCH, P.A.
Account Number : 105065002440
Phone : (941) 366-9841
Fax Number : (941) 951-0677

08 JUL 16 AM 9:03
SECRETARY OF STATE
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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

PITZ FORMCARE SYSTEMS, LLC

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B. Tadlock JUL 17 2008

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

PITZ FORMCARE SYSTEMS, 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 07/15/2008 and assigned
Florida document number L08000068253

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DIVISION OF CORPORATIONS

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 "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

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
MGRM	MICHAEL MERZ	530 NE 6TH AVE CAPE CORAL FL 33909	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	FALK PITZ	530 NE 6TH AVE CAPE CORAL FL 33909	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	MERZ, LLC	530 NE 6TH AVE CAPE CORAL FL 33909	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	KAUFMANN SERVICES, LLC	2198 MAIN STREET SARASOTA FL 34237	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGR	MICHAEL MERZ	530 NE 6TH AVE CAPE CORAL FL 33909	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGR	FALK PITZ	GARTENSTR 4 WETZLAR 35581 GERMANY	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove

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

☒ ADD: MGR CARMEN MERZ 530 NE 6TH AVE
CAPE CORAL FL 33909

Dated JULY 16TH, 2008


Signature of a member or authorized representative of a member

STEVEN A. CULBREATH

Typed or printed name of signee

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