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JAN 23 2013

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: **I CARE CLINIC 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:

JUNAID A SYED

Name of Person

I CARE CLINIC LLC

Firm/Company

10411 BIG TREE CT

Address

ORLANDO, FL 32836

City/State and Zip Code

JUNAIDASYED@GMAIL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JUNAID A SYED

Name of Person

407 953-9296

at ()

Area Code & Daytime Telephone Number

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Enclosed is a check for the following amount:

☐ \$25.00 Filing Fee

☒ \$30.00 Filing Fee &
Certificate of Status

☐ \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

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

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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

I CARE CLINIC LLC

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

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The Articles of Organization for this Limited Liability Company were filed on 10/15/2008 and assigned
Florida document number L08000097454.

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)

3262 VINELAND ROAD

UNIT 102

KISSIMMEE, FL 34746

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

10411 BIG TREE CT

ORLANDO, FL 32836

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:

JUNAID A SYED

New Registered Office Address:

10411 BIG TREE CT

Enter Florida street address

ORLANDO

City

Florida 32836

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.

Junaid A Syed
If Changing Registered Agent, Signature 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 = Manager
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	JAVED A SYED	9676 KILGORE ROAD	<input type="checkbox"/> Add
		ORLANDO, FL 32836	<input checked="" type="checkbox"/> Remove
MGRM	JUNAID A SYED	10411 BIG TREE CT	<input checked="" type="checkbox"/> Add
		ORLANDO, FL 32836	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

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

Dated **JANUARY 16TH**, **2013**

Syed

Signature of a member or authorized representative of a member

JAVED A SYED

Typed or printed name of signee

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Filing Fee: \$25.00

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TALLAHASSEE, FLORIDA**