## L09000019511

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D. BRUCE



ACCOUNT NO. : I2000000195

REFERENCE: 722471 7658329

AUTHORIZATION :

COST LIMIT

ORDER DATE :	July 1	1, 2013
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ORDER TIME : 2:59 PM

ORDER NO. : 722471-005

CUSTOMER NO: 7658329

## DOMESTIC AMENDMENT FILING

NAME:

ATLANTIC BIOLOGICALS

DIAGNOSTICS, LLC

EFFECTIVE DATE:

XX ARTICLES OF AMENDMENT RESTATED ARTICLES OF INCORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

\_\_\_ CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Susie Knight -- EXT# 52956

EXAMINER'S INITIALS:

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	LOGICALS DIAGNOSTICS, LLC		
( <u>Name of the Limited Liabilit</u> (A Florida	y Company as it now appears on our record. Limited Liability Company)	<u>s.</u> )	
The Articles of Organization for this Limited Liability ( Florida document number L09000019511		and assigned	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the lim	nited liability company here:		
INNOVATIVE VETERINARY SOLUTIONS,	LLC		
The new name must be distinguishable and end with the wo "L.L.C."	rds "Limited Liability Company," the designat	ion "LLC" or the abbreviation	
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADD)	RESS)		
		5.5%	
Enter new mailing address, if applicable:		<u> </u>	
(Mailing address MAY BE A POST OFFICE BOX)			
		ST. 2:	
		<u> </u>	
B. If amending the registered agent and/or regis registered agent and/or the new registered office add		iter the name of the new	
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida stree	et 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

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	nnager Managing Member		
<u>Title</u>	Name	Address	Type of Action
<del></del>			Add
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Signature of althember of	authorized represe	entative of a member	
Karen L.	-Moody, Ma	nager	
	Signarue vi aylıcılber o	2013 Signarule of whether of authorized represe Karen L. Moody, Ma	2013  Signaruk of a Member or authorized representative of a member Karen L. Moody, Manager

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Filing Fee: \$25.00

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