

L090000043438

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

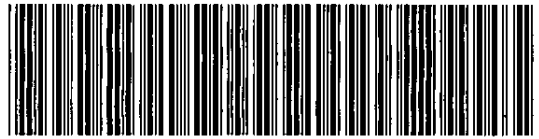
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800160177688

09/14/09--01046--007 **25.00

FILED
09 SEP 14 AM 11:47
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

N. C. 1000 SEP 15 2009

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: US MEDICAL INTERNATIONAL, 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:

LORENA COLOMBO

Name of Person

INTERAMERICAN ALLIANCE, A PRIVATE LAW FIRM, P.A.

Firm/Company

11900 BISCAYNE BLVD., SUITE 630

Address

MIAMI, FL 33181

City/State and Zip Code

CORPORATIONS@INTERALLIANCELAW.COM

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

For further information concerning this matter, please call:

LORENA COLOMBO

Name of Person

at (305)

459.1131

Area Code & Daytime Telephone Number

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

US MEDICAL INTERNATIONAL, LLC

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

FILED
09 SEP 14 AM 11:47
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 6/1/2009 and assigned
Florida document number L09000043438.

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: INTERAMERICAN ALLIANCE, A PRIVATE LAW FIRM, P.A.

New Registered Office Address: 11900 BISCAYNE BLVD, SUITE 630

Enter Florida street address

MIAMI, Florida 33181
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 = Manager

MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGMR	CALZADILLA, ALEXANDER	10368 NW 31 TERRACE MIAMI, FL 33172	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	CALZADILLA, ALEX	10368 NW 31 TERRACE MIAMI, FL 33172	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

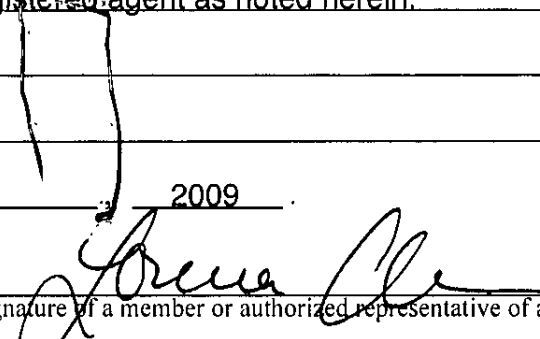
D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

This Amendment is being filed to correct the name of the sole

Manager Member to Alexander Calzadilla and update the name

and address of the registered agent as noted herein.

Dated August 16, 2009


Signature of a member or authorized representative of a member

Lorena Colombo, Esq., attorney in fact for US MEDICAL INTERNATIONAL, LLC
Typed or printed name of signee

FILED
09 SEP 14 AM 11:47
SECRETARY OF STATE
TALLAHASSEE, FLORIDA