

1/13/2016 12:26:16 PM From: To: 8 (617) 533 (1) 5

**L09000051791**

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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

From: Account Name : C T CORPORATION SYSTEM  
Account Number : FCA0000000023  
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TALLAHASSEE, FLORIDA

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
INFINITY HOME CARE OF OCALA, LLC**

Certificate of Status	0
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N. Outrigem JAN 14 2016

### COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Infinity Home Care of Ocala, 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:

Celeste Peiffer

Name of Person

Amedisys, Inc.

Firm/Company

5959 S. Sherwood Forest Blvd.

Address

Baton Rouge, Louisiana 70816

City/State and Zip Code

celeste.peiffer@amedisys.com

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

For further information concerning this matter, please call:

Celeste Peiffer

225

299-3366

Name of Person

at (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

FILED

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

16 JAN 13 AM 9:06

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

Infinity Home Care of Ocala, 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 May 28, 2009 and assigned  
Florida document number L09000051791.

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 contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

5959 S. Sherwood Forest Blvd.

(Principal office address MUST BE A STREET ADDRESS)

Baton Rouge, Louisiana 70816

Enter new mailing address, if applicable:

5959 S. Sherwood Forest Blvd.

(Mailing address MAY BE A POST OFFICE BOX)

Baton Rouge, Louisiana 70816

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:

CT Corporation System

New Registered Office Address:

1200 South Pine Island Road

Enter Florida street address

Plantation

Florida 33324

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 605, 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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	Infinity Home Care, L.L.C.	5959 S. Sherwood Forest Blvd.	<input type="checkbox"/> Add
		Baton Rouge, Louisiana 70816	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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

Article V of the Articles of Organization of Infinity Home Care of Ocala, LLC dated May 28, 2009,  
as amended by the Articles of Amendment thereto dated August 12, 2010,  
is deleted in its entirety and replaced with:

**"ARTICLE V**

**MANAGEMENT**

The limited liability company is a member-managed limited liability company."

**FILED**  
16 JAN 13 AM 9:06  
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**E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)**

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated January 7, 2016

Signature of a member or authorized representative of a member

Paul B. Kusserow, President & Authorized Representative of the Member - Infinity Health Care, L.L.C.

Typed or printed name of signer