

LD9000111484

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

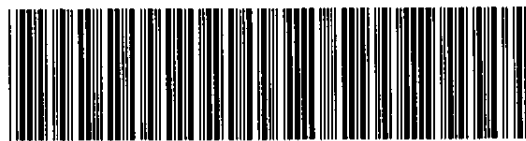
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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AND
FILED

D. BRUCE

DEC 19 2012

EXAMINER



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195

REFERENCE : 464636 7292882

AUTHORIZATION

COST LIMIT : \$ 25.00

Spuddean

ORDER DATE : December 18, 2012

ORDER TIME : 3:57 PM

ORDER NO. : 464636-005

CUSTOMER NO: 7292882

DOMESTIC AMENDMENT FILING

NAME: ACTIV DOCTORS CONSULT, LLC

EFFECTIVE DATE:

XX ARTICLES OF AMENDMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Stephanie Milnes -- EXT# 52920

EXAMINER'S INITIALS: _____

CLERK OF SUPERIOR COURT
HARRISBURG, PENNSYLVANIA

DEC 18 PM 12:23

APPROVED
AND
FILED

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: **ACTIV DOCTORS CONSULT, LLC**

Name of Limited Liability Company

The enclosed Articles of Amendment and fees(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Marlon A. Hill, Esq.

Name of Person

delancyhill, P.A.

Firm Company

201 S. Biscayne Blvd., Suite 2812

Address

Miami FL 33131

City/State and Zip Code

mhill@delancyhill.com

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

For further information concerning this matter, please call:

Marlon A. Hill

Name of Person

786 777-0184

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

12/07/10 PM12:23
CORPORATION
TALLAHASSEE, FL 32301

APPROVED
AND
FILED

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

ACTIV DOCTORS CONSULT, 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 11/19/2009 and assigned
Florida document number L09000111484.

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 "LLC."

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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FILED

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	Florent Monssoh	250 CATALONIA AVE, SUITE 804 CORAL GABLES FL 33134 US	<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
MGRM	MAMUSA, LLC	250 CATALONIA AVE, SUITE 804 CORAL GABLES FL 33134 US	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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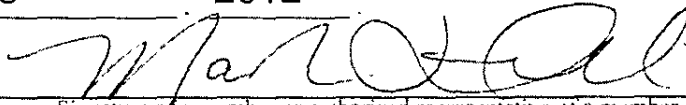
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2018 PM12:23

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

Dated December 18

2012



Signature of a member or authorized representative of a member

MARLON HILL

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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CLERK OF DISTRICT COURT
TALLAHASSEE, FLA. 32301