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2018 DEC 28 PM 4: 58
SECRETARY OF STATE
TALL AND SEE, FL

## **COVER LETTER**

	ion Section of Corporations	
Interar	merican Medical Center Group, LLC	
SUBJECT:	Name of Limited Liability Company	
The enclosed Articl	les of Amendment and fee(s) are submitted for filing.	
Please return all cor	rrespondence concerning this matter to the following:	
	William C. Lamoreaux	
	Name of Person	
	Interamerican Medical Center Group, LLC	
	Firm/Company	
	1000 NW 57th CT Suite 200	
	Address	
	Miami, Fl 33126	
	City/State and Zip Code blamoreaux@imchealth.com	
-	E-mail address: (to be used for future annual report notification)	
For further informat	tion concerning this matter, please call:	
Kevin Wirges	305 649-8100 at ()	
N:	ame of Person Area Code Daytime Telephone Number	
Enclosed is a check	for the following amount:	
■ \$25.00 Filing Fo	Tee \$\Bigcup \\$30.00 \text{ Filing Fee & } \Bigcup \\$55.00 \text{ Filing Fee & } \Bigcup \\$60.00 \text{ Filing Fee, } \\ \text{Certificate of Status} \\ \text{Certified Copy (additional copy is enclosed)} \\ \ext{Certified Copy (additional copy is enclosed)} \\ Certified Copy (additional copy is enc	

MAILING ADDRESS:

٠,

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**

FILED

Interamerican Medical Center Group, LLC

2018 DEC 28 PM 4:58

(Name of the Limited L.	iability Compan	y as it now appears	on our records:)	The second
( <u>Name of the Limited Li</u> (A F	iorida Limited Li	ability Company)	TALL C:	ASSEF, FI
The Articles of Organization for this Limited Liabil				
Florida document number L09000112932	<del></del> -			
This amendment is submitted to amend the following	ıg:			
A. If amending name, enter the new name of the	limited liabil	ity company her	<u>e</u> :	
The new name must be distinguishable and contain the words	"Limited Liabilit	y Company," the des	ignation "LLC" or the	he abbreviation "L.L.C."
Enter new principal offices address, if applicable	:			
(Principal office address MUST BE A STREET A	DDRESS)		<u> </u>	
		·		<del></del>
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE BOX	<u>v)</u>			
B. If amending the registered agent and/or registered agent and/or the new registered office	•		our records, <u>en</u>	ter the name of the new
Name of New Registered Agent:			<del> </del>	
New Registered Office Address:				
		Enter Florid	a street address	
_	·		, Florida	Zip Code
		City		Zip Code
New Registered Agent's Signature, if changing Regis	stered 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>	Name	Address	Type of Action
CEO	William C. Lamoreaux	1000 NW 57th CT Suite 200, Miami, Fl 33126	■ Add
			□ Remove
			Change
CEO	Justo Pozo	1000 NW 57th Ct Suite 200, Miami, Fl 33126	☐ Add
		·	Remove
			☐ Change
CFO	Kevin Wirges	1000 NW 57th CT Suite 200, Miami, FL 33126	
			☐ Remove
			Change
			□ Remove
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Effective date, if other than the o	July 23rd, 2018 date of filing:	(optional) late of filing or more than 90 days after filing.) Pursuant t	
(If an effective date is listed, the date must Note: If the date inserted in this blo document's effective date on the De	ck does not meet the applicable	late of filing or more than 90 days after filing.) Pursuant t e statutory filing requirements, this date will not be	o 605.0207 (3) e listed as the
the record specifies a delayed ) The 90th day after the reco		n effective time, at 12:01 a.m. on the e	earlier of:
Dated December 27th	, 2018		
<del> </del>	Signature of a member or authorized	ed representative of a member	_
Kevin Wirges			
	Typed or printed na	ame of signee	

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Filing Fee: \$25.00