

L10000004511

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

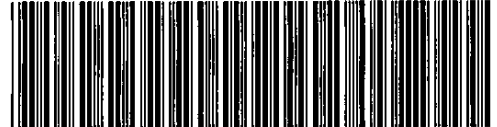
Special Instructions to Filing Officer:

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B. KOHR

JAN - 3 2012

EXAMINER



200215479532

01/03/12--01003--013 \*\*53

DEPT. OF REVENUE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

12 JAN - 3 AM 11:24

12 JAN - 3 PM 1:00

CORPDIRECT AGENTS, INC. (formerly CCRS)  
515 EAST PARK AVENUE  
TALLAHASSEE, FL 32301  
222-1173

FILING COVER SHEET  
ACCT. #FCA-14

DIVISION  
12 JAN -3

CONTACT: Kim Weidenbach

DATE: 01/03/12

REF. #: 000174.159599

CORP. NAME: TRIANGLE DDS (LAKEWOOD RANCH), LLC changing its name to: TRIANG  
(6240 LAKE OSPREY), LLC

- |  |   |  |
|--|---|--|
| <input type="checkbox"/> ARTICLES OF INCORPORATION   | <input checked="" type="checkbox"/> ARTICLES OF AMENDMENT | <input type="checkbox"/> ARTICLES OF DISSOLUTION |
| <input type="checkbox"/> ANNUAL REPORT               | <input type="checkbox"/> TRADEMARK/SERVICE MARK           | <input type="checkbox"/> FICTITIOUS NAME         |
| <input type="checkbox"/> FOREIGN QUALIFICATION       | <input type="checkbox"/> LIMITED PARTNERSHIP              | <input type="checkbox"/> LIMITED LIABILITY       |
| <input type="checkbox"/> REINSTATEMENT               | <input type="checkbox"/> MERGER                           | <input type="checkbox"/> WITHDRAWAL              |
| <input type="checkbox"/> CERTIFICATE OF CANCELLATION |   |  |
| <input type="checkbox"/> OTHER:                      |   |  |

STATE FEES PREPAID WITH CHECK# 54 2877 FOR \$ 55.00

AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED:

\_\_\_\_\_ COST LIMIT: \$ \_\_\_\_\_

PLEASE RETURN:

- |  |   |                                      |
|--|---|--------------------------------------|
| <input checked="" type="checkbox"/> CERTIFIED COPY | <input type="checkbox"/> CERTIFICATE OF GOOD STANDING | <input type="checkbox"/> PLAIN STAMP |
| <input type="checkbox"/> CERTIFICATE OF STATUS     |   |                                      |

Examiner's Initials

DIVISION  
12 JAN-3 1

**ARTICLES OF AMENDMENT  
TO THE ARTICLES OF ORGANIZATION OF  
TRIANGLE DDS (LAKEWOOD RANCH), LLC**

The undersigned, certifies that:

1. We are the Managers of Triangle DDS (Lakewood Ranch), LLC, a Florida limited liability company, whose Articles of Organization were filed with the Secretary of State, State of Florida, on January 13, 2010.

2. The following Amendment to the Articles of Organization was adopted by the Limited Liability Company.

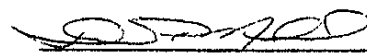
3. ARTICLE I of the Articles of Organization is hereby amended in its entirety to read as follows:

**ARTICLE I  
NAME**

The business and affairs of the Limited Liability Company shall be conducted under the name of:

**TRIANGLE DDS (6240 LAKE OSPREY), LLC**

IN WITNESS WHEREOF, the undersigned Managers of the Limited Liability Company have executed these Articles of Amendment this 3rd day of January, 2012.



David P. Nichols



Steven R. Matzkin



Mitchell B. Olan