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236 East 6th Avenue . Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066)

nue . Tallahassee, Florida 32303 (850) 222-2666 or (800) 969-1666 . Fax (850) **22**2-1666

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ARTICLES OF CORRECTION FOR FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

Pursuant to section 608.4115, F.S., this document is being submitted <u>within the required 30</u> <u>business days</u> to correct the <u>attached</u> articles of organization or application to transact business in Florida.

| The name of the limited liability company is: Florida Family Physicians, LLC | | | | |
|---|--|--|--|--|
| ND: The articles of organization or the application to transact business | | | | |
| (CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT | | | | |
| ontains an incorrect statement. The incorrect statement, the reason the statement is correct, and the corrected statement are as follows: ne street address and mailing address of the Limited Liability Company was | | | | |
| incorrect. The correct street address and mailing address of the Limited Liability | | | | |
| Company is: 2045 Glenwood Drive, Winter Park, FL 32792 US. | | | | |
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| OR Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows: | | | | |
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| February 4 Signature of a member of authorized representative of a member James J. Flick Typed or printed name of signee | | | | |
| | | | | |

Filing Fee:

Certified Copy:

\$25.00

\$30.00 (optional)

Electronic Articles of Organization For Florida Limited Liability Company

L10000011136 FILED 8:00 AM January 29, 2010 Sec. Of State dbruce

Article I

The name of the Limited Liability Company is: FLORIDA FAMILY PHYSICIANS, LLC

Article II

The street address of the principal office of the Limited Liability Company is:

5840 GLENWOOD DRIVE WINTER PARK, FL. US 32792

The mailing address of the Limited Liability Company is:

5840 GLENWOOD DRIVE WINTER PARK, FL. US 32792

Article III

The purpose for which this Limited Liability Company is organized is: ANY AND ALL LAWFUL BUSINESS.

Article IV

The name and Florida street address of the registered agent is:

JAMES J FLICK 3700 SOUTH CONWAY ROAD SUITE 100 ORLANDO, FL. 32812

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Registered Agent Signature: JAMES J. FLICK

Article V

The name and address of managing members/managers are:

Title: MGR JASVENDAR S NANDRA 5840 GLENWOOD DRIVE WINTER PARK, FL. 32792 US

Signature of member or an authorized representative of a member Signature: JAMES FLICK

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