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(((H150002509573)))



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Division of Corporations

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Account Number : 075350000514

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN QUICK CARE MED, PL

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Audit Fax# H150002509573

QUICK CARE MED, PL		
(Name of the Lim	ited Liability Company as it now app (A Florida Limited Liability Company)
The Articles of Organization for this Limited Florida document number L10000120159	Liability Company were filed on _	
This amendment is submitted to amend the fol	llowing:	
A. If amending name, enter the new name	of the limited liability company	here:
QUICK CARE MED, L.L.C.		
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 appli	cable:	
(Principal office address MUST BE A STRE	ET ADDRESS)	世紀 6
		20 [7
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE	<u></u>	
B. If amending the registered agent and registered agent and/or the new registered of Name of New Registered Agent:		on our records, enter the name of the new
	1245 COURT STREET	
New Registered Office Address:		orida street address
	CLEARWATER	, Florida 33756
	City	Zip Code
New Registered Agent's Signature, if changing	Registered Agent:	
	ed agent and agree to act in thi per and complete performance of istered agent as provided for in	Chapter 603, F.S. Or, if this accument is

•

If Changing Registered Agent, Signature of New Registered Agent

company has been notified in writing of this change.

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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

Title	<u>Name</u>	Address	Type of Action
MGR	THE NEW IMAGE MED SPA, PL	1982 NORTH PROSPECT AVE	
		LECANTO, FL 34461	■ Remove
			☐ Change
MGR	DACELIN ST. MARTIN, M.D.	P.O. BOX 2066	■ Add
		LECANTO, FL 34460	Remove
			A COLOR TO
			1 20 F
			TO Remove
			Removes
			Add
			☐ Remove
			Change
			Add
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			Change
			Add
			☐ Remove
,			Change

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SEE	ling any other information, enter change(s) here: (Attach additional sheets E ATTACHED	s, if necessary.)
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		28
ffective If th	date, if other than the date of filing: ve date is listed, the date must be specific and cannot be prior to date of filing or more than 90 d the date inserted in this block does not meet the applicable statutory filing requireme 's effective date on the Department of State's records.	_ (optional) lays after filing.) Pursuant to 605. ents, this date will not be liste
e 901	d specifies a delayed effective date, but not an effective time, at $f 1$)th day after the record is filed.	2:01 a.m. on the earlie
d	Octuber 20	
		r
	Signature of a member or authorized representative of a member	1

Page 3 of 3

Filing Fee: \$25.00

Audit Fax No: H150002509573

ATTACHMENT TO ARTICLES OF AMENDMENT OF QUICK CARE MED, PL, A FLORIDA LIMITED LIABILITY COMPANY

WHEREAS, QUICK CARE MED, PL, was formed on November 18, 2010 by filing Articles of Organization with the Florida Secretary of State; and

WHEREAS, QUICK CARE MED, PL, is changing its name to QUICK CARE MED, L.L.C. effective with filing of the Articles of Amendment to the Articles of Organization attached hereto with the Florida Secretary of State; and

WHEREAS, the Member and Manager wish to Restate and Amend the Articles of Organization of the Company in their entirety; and

THEREFORE, the Articles of Organization filed with the Florida Secretary of State on November 18, 2010 are hereby Restated and Amended in their entirety as follows:

ARTICLE I - Name:

The name of the Limited Liability Company is:

QUICK CARE MED, L.L.C.

ARTICLE II - Address:

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

1907 Highway 44 West Inverness, FL 34453

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

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

Alan S. Gassman, Esq. 1245 Court Street, Suite 102 Clearwater, FL 33756

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 as provided for in Chapter 605, F.S.

Audit Fax No: #150002509573

ARTICLE IV - Members and Managers:

The name and address of each person authorized to manage and control the Limited Liability Company:

red Agent's Signature

Title:

Name and Address:

MGR

DACELIN ST. MARTIN, M.D. P.O. Box 2066 Lecanto, FL 34460

ARTICLE V - Effective Date:

Effective date, if other than the date of filing: 10 20 15 (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five (5) business days prior to or ninety (90) days after the date of filing.)

ARTICLE VI - Other provisions, if any.

Written Operating Agreement

Any operating agreement entered into by the Members of the Limited Liability Company, and any amendments or restatements thereof, shall be in writing, and shall govern all matters relating to the governance of the affairs of the Limited Liability Company, the conduct of its business and the relations of its Members, including without limitation, the amendment of these Articles. No oral agreement among any of the Members or Managers of the Limited Liability Company shall be deemed or construed to constitute any portion of, or otherwise affect the interpretation of, any written operating agreement of the Limited Liability Company, as amended and in existence from time to time.

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REQUIRED SIGNATURE:

Signature of a member or an authorized representative of a member.

(In accordance with section 605.0203(1)(b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

ALAN S. GASSMAN, Authorized Representative Typed or printed name of signee

J/\S\St. Martin, Dacelin\Quick Care Med, L.L.C. (FL)\Attachment to Articles of Amendment.1.wpd tja 10/19/15

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