## L 11000001147

(Requestor's	Name)	
(Address)		
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**EXAMINER** 



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SECRETARY OF STATE STATE STATE OF COMPORATIONS

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RECEIVED



## RECEIVED

ION SERVICE COMPANY	11 AUG -4 AM 10: 44
ACCOUNT NO.	DEPARTMENT OF CHATE  : I20000000 PM STOR OF CHRPORATIONS FALLARIANSEE FLORIDA
	: 867831 7698889 <del>2</del> 4.
AUTHORIZATION	Louis Home
COST LIMIT	: \$ 25.00
ORDER DATE : August 3, 2011	spubblenan E. S.
ORDER TIME : 9:20 AM	9
ORDER NO. : 867831-005	
CUSTOMER NO: 7698889	
NAME: THERIAC ENTERP RIVERHEAD, LLC	
EFFECTIVE DATE:	
XX ARTICLES OF AMENDMENT RESTATED ARTICLES OF INCOL	RPORATION
PLEASE RETURN THE FOLLOWING AS I	PROOF OF FILING:
CERTIFIED COPY PLAIN STAMPED COPY CERTIFICATE OF GOOD STAN	NDING
CONTACT PERSON: Becky Peirce	- EXT#
I	EXAMINER'S INITIALS:

## **COVER LETTER**

TO: Registration S Division of Co			THE STEEL
SUBJECT: Theriac	Enterprises of Riverh (Name of Lin	nead, LLC nited Liability Company)	
The enclosed Articles of	Amendment and fee(s) are sul	bmitted for fiting.	
Please return all correspond	ondence concerning this matter	r to the following:	
	Cathy Newkirk		
		(Name of Person)	
	Theriac Enterprises	(Firm/Company)	
	5292 Summerlin Co	ommons Way Suite 1103 (Address)	
	Fort Myers Florida	33907 (City/State and Zip Code)	
For further information c	oncerning this matter, picase c	eall:	
Cathy Newkirk (Name of	of Person)	at (at () 239-936-190 (Area Code & Daytimo T	14 Telephone Number)
Enclosed is a check for th	e following amount:		
☑ \$25.00 Filing Fee	□\$30.00 Filing Pec & 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 Taliahassee, PL 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

Theriac Enterprises of Rive	erhead, LLC	our vacovda)
(A I	Lability Company as it now appears on a lorida Limited Liability Company)	our records.)
The Articles of Organization for this Limited Lin	bility Company were filed on $\frac{1-4-20}{1}$	11 and assigned
Florida document number <u>L11000001147</u>		
This amendment is submitted to amend the follow	ving:	
A. If amending name, enter the new name of t	he limited liability company here:	
The new name must be distinguishable and end with "L.L.C."	the words "Limited Liability Company," tl	he designation "LLC" or the abbreviation
Enter new principal offices address, if applicab	ole;	
(Principal office address MUST BE A STREET	ADDRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BO	1 V	
B. If amending the registered agent and/or registered agent and/or the new registered office	registered office address on our re e address here:	cords, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	(Enter Florida street address)	
	(City)	, Florida(Zip Code)
	(UII <i>Y)</i>	(Lip Coue)

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)

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

Title	Name	Address	Type of Action			
MGR_	TEM, LLC	5292 Summerlin Commons Way Suite 1103 Fort Myers, Florida 33907	Add Remove			
MGR_	DDM, LLC	5292 Summerlin Commons Way Suite 1103 Fort Myers, Florida 33907	Add Remove			
•			Add Remove			
<del></del>			Add Remove			
			Add Remove			
			Add Remove			
D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)						
			_			
Dated 2-1-2011						
Signature of a member or authorized representative of a member						
_	Daniel E. Dosoretz Managing Member TEM  Typed or printed name of signer					

Page 2 of 2

Filing Fee: \$25.00