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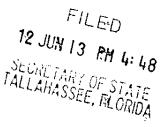
## **COVER LETTER**

Registration Section Division of Corporations

TO:

SUBJECT:		THCARE GROUP, LL	<u>c</u>		
	Name of Lim	ited Liability Company			
The enclosed Artic	les of Amendment and fee(s) are su	bmitted for filing.			
Please return all co	rrespondence concerning this matte	r to the following:			
		Bryan Rotella, Esq.  Name of Person			
		rame of relation			
•		Ansa Assuncao, LLP			
		Firm/Company			
100 S. Ashley Drive, Suite 1740					
Address					
		Tampa, FL 33602			
		City/State and Zip Code	<del></del>		
	brya	an.rotella@ansalaw.com			
	E-mail address:	to be used for future annual report noti	fication)		
For further informa	tion concerning this matter, please	call:			
	Bryan Rotella	at ( 813 )	221-5206		
N	ame of Person		ne Telephone Number		
			•		
Enclosed is a check	for the following amount:				
\$25.00 Filing Fe	Se \$30.00 Filing Fee & 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)		
R D P.	IAILING ADDRESS: egistration Section ivision of Corporations O. Box 6327 allahassee, FL 32314	STREET/COUR Registration Section Division of Corpo Clifton Building 2661 Executive Co Tallahassee, FL 32	on rations enter Circle		

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



TRILLIUM (Name of the Limited I		CARE GROUP n.v. as it now appears Liability Company)		<del></del>	
The Articles of Organization for this Limited Lia Florida document number L110000012		were filed on	01/04/2011	and assigned	
This amendment is submitted to amend the follow	ving:				
A. If amending name, enter the new name of t	he limited liab	ility company here	:		
The new name must be distinguishable and end with "L.L.C."	the words "Limi	ted Liability Compan	y," the designation "L	LC" or the abbreviation	
Enter new principal offices address, if applicable:		5265 Office Park Boulevard			
(Principal office address MUST BE A STREET	ADDRESS)	Suite 101			
		Bradenton, FL	34203	<u> </u>	
Enter new mailing address, if applicable:		5265 Office Pa	rk Boulevard		
(Mailing address MAY BE A POST OFFICE BOX)		Suite 101			
	Bradenton, FL 34203				
B. If amending the registered agent and/or registered agent and/or the new registered officers.	registered off ce address here	fice address on ou <u>e</u> :	r records, <u>enter t</u>	he name of the new	
Name of New Registered Agent:	Bryan Rotell	la, Esq.			
New Registered Office Address:	c/o Ansa As	suncao, LLP, 10	0 S. Ashley Driv r Florida street addi		
		Tampa	. Florida	33602	
•		City		Zip Code	

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

<u> itle</u>	<u>Name</u>	Address	Type of Action
			Add Remove
	·		Add Remove
			Add Remove
			Add Remove
<del> </del>			Add Remove
			Add Remove
. If amend	ling any other information, enter ch	ange(s) here: (Attach additional sheets, if necessary.)	_
_			<del>-</del> 
ated	June 8 ,	2012	_
		shy M	
	Signature of a men	nber of authorized representative of a member	<del></del>

Page 2 of 2

Filing Fee: \$25.00