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## Florida Department of State Division of Corporations Electronic Filing Cover Sheet

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TO:

Division of Corporations Fax Number : (850)617-6383

From:

Account Name : GASSMAN & ASSOCIATES, P.A. Account Number : 075350000514 Phone : (727)442-1200 Fax Number : (727)443-5829



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Email Address:

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**MAR 18** 

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## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN FANA MEDICAL GROUP - TAMPA ROAD, L.L.C.

Certificate of Status	0
Certified Copy	0
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Corporate Filing Menu

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MAR 19 2013 J. BRYAN

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# Audit Fax# H1300006223383

### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

#### FANA MEDICAL GROUP - TAMPA ROAD, L.L.C.

(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Com	pany were filed on 06/15/2011	and assigned
Florida document number L11000070067		
This amendment is submitted to amend the following: A. If amending name, <u>enter the new name of the limited</u>		THE RECENT OF THE
FANA MEDICAL GROUP - PALM HARBOR, L.		The m
The new name must be distinguishable and end with the words " "L.L.C."		
Enter new principal offices address, if applicable:		STA 33
(Principal office address MUST BE A STREET ADDRES.	<u>S)</u>	0 V
Enter new mailing address, if applicable:	u <u> </u>	
(Mailing address MAY BE A POST OFFICE BOX)		
	·····	
B. If amending the registered agent and/or registere registered agent and/or the new registered office address		er the name of the new
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, Florida	
	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

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H130000422383

## H130000622383

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

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<u>Title</u>	<u>Name</u>	Address	Type of Action
<u> </u>			Add
			Remove
u	<b></b>		FILED FILED FILED Add
			Reito
			Add
			Remove
			Add
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated March 18 2013 Signature of a member or authorized representative of a member ALAN S. GASSMAN, Authorized Representative of Member Typed or printed name of signee Page 3 of 3 Filing Fee: \$25.00



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