

Li 000096616

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only

FEB 25 2013

G. McLEOD



400244489834

02/22/13--01020--001 \*\*25.00

13 FEB 22 PM 4:31

## **COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: SALUD MEDICA, LLC**  
Florida document number L11000096616

The enclosed Articles of Amendment and fee(s) are submitted for filing.  
Please return all correspondence concerning this matter to the following:  
Matthew J. Monaghan, PA  
PO Box 533122  
Orlando, FL 32853

E-mail address: executives@saludmedica.com (to be used for future annual report notification)

For further information concerning this matter, please call: Matthew J. Monaghan, Esq. at 407-497-3804

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee ☐ \$30.00 Filing Fee & ☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee,  
Certificate of Status Certified Copy Certificate of Status & (additional copy is enclosed) Certified Copy  
(additional copy is enclosed)

**MAILING ADDRESS: STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327 Clifton Building  
Tallahassee, FL 32314 2661 Executive Center Circle

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF SALUD MEDICA, LLC**  
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on August 22, 2011, and assigned Florida document number L11000096616.

This amendment is submitted to amend the following:

**ARTICLE V –REGISTERED AGENT**

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

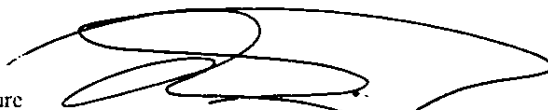
FABRIZIO I. SAPIEN

424 EAST CENTRAL BLVD. SUITE 405

ORLANDO, FL 32801

*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 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.*

Registered Agent's Signature



FABRIZIO I. SAPIEN

Dated February 12, 2013



By: FABRIZIO I. SAPIEN Member

13 FEB 22 PM 4:32  
11000096616