L11000108363

Special Instructions to Filing Officer:

A. LUNT

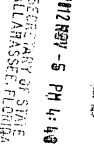
NOV -8 2012

EXAMINER

Office Use Only



500241399535



11/05/12--01037--011 **30.00

COVER LETTER

TO:

Registration Section Division of Corporations

SUBJECT.

Genesis Home Health Care Services of Central Florida, LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Garvin Mark

Name of Person

Genesis Home Health Care Services of Central Florida, LLC

Firm/Company

5104 Orange Blossom Trail - Suite # 208

Address

Orlando, Florida 32810

City/State and Zip Code

genesishhc@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Garvin Mark

_{ar} ³²¹ \ 262-8235

Name of Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$25.00 Filing Fee

■\$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)

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 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 OF

Genesis Health Home Care Services of Central Florida, LLC

(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 O	Company were filed on Sep	tember 22, 20	1 and as	ssigned	
Florida document number L11000108363	·				
This amendment is submitted to amend the following:		·			
A. If amending name, enter the new name of the lim	nited liability company here	' :			
		· · · · · · · · · · · · · · · · · · ·	2 27.		
The new name must be distinguishable and end with the wo "L.L.C."	rds "Limited Liability Compan	y," the designation		abbreviatio	
Enter new principal offices address, if applicable:			ပြုံကြီး မော		
(Principal office address MUST BE A STREET ADD	RESS)			**************************************	
			95 5		
			টুন 🕉	ı	
Enter new mailing address, if applicable:					
(Mailing address MAY BE A POST OFFICE BOX)					
B. If amending the registered agent and/or registered agent and/or the new registered office add Name of New Registered Agent:		ur records, <u>enter</u>	the name	of the ne	
		,		_	
New Registered Office Address:	Ente	er Florida street ac	la street address		
		. Florida			
		, Fiorida _	Zip Co	*	
	City		zip co	ae	

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 <u>Title</u> Name Address Type of Action 12614 Bear Creek Terrace **MGRM** Patricia A. Mark, CFO Beltsville, MD 20705 Remove 1660 Malone Bay Drive Garvin Mark, CFO **MGRM** Orlando, FL 32810

	Ownership interest for Patricia Mark now changed from 50% to 0%
_	Ownership interest to Garvin Mark now changed from 50% to 100%
_	
d	1/1/2012 , 2012 .
	Daren Mail.
	Signature of a member or authorized representative of a member
	Garlin Mark

2812 NOV -5 PM 4: 48