

**L11000115424**

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**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
ZORAYDA J. TORRES MD PLLC**

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**AMENDED AND RESTATED**

**ARTICLES OF ORGANIZATION OF**

**ZORAYDA J. TORRES, PLLC**

**(n/a UPSTREAM MEDICAL CONSULTS, PLLC)**

**A FLORIDA LIMITED LIABILITY COMPANY**

The undersigned, being authorized to execute and file these Amended and Restated Articles of Organization changing the name of the PLLC, hereby certifies that: Pursuant to Section 605.0202 and 621.051 of the Florida Statutes, the Articles of Organization of **ZORAYDA J. TORRES MD, PLLC**, a Florida Professional Limited Liability Company, which was originally organized on October 10, 2011, Document #L11000115424 with an effective date of October 6, 2011, are hereby amended and restated in their entirety. All amendments included herein have been unanimously adopted pursuant to Section 605.0202 of the Florida Statutes. These Articles are being amended and restated to change the name of the PLLC to **UPSTREAM MEDICAL CONSULTS, PLLC**.

**ARTICLE I — Change of Name:**

The name of the Professional Limited Liability Company was: **ZORAYDA J. TORRES MD, PLLC**. It is now being changed to **UPSTREAM MEDICAL CONSULTS, PLLC**.

**ARTICLE II — Address:**

The mailing address and street address of the principal office of the professional limited liability company is:

2218 Campestre Terrace  
Naples, FL 34119

**ARTICLE III — Authorized Members**

The name and address of the sole Member authorized to manage and control the PLLC is:

Zorayda J. Torres, MD  
2218 Campestre Terrace  
Naples, FL 34119

**ARTICLE IV — Duration & Purpose:**

The period of duration for the professional limited liability company shall be perpetual. It shall be operated for the purpose of operating a medical practice focusing on internal, functional and

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holistic/integrative medicine. It shall be permitted to engage in the transaction of any and all business activities permitted under the laws of Florida and the United States of America.

**ARTICLE V — Effective Date**

The term of this company shall be effective on August 27, 2014.

**ARTICLE VI - Registered Agent**

The name of the initial registered agent and the Florida street address of the registered agent and office shall be:

2218 Campestre Terrace  
Naples, FL 34119

**ARTICLE VII — Admission of Additional Members**

The right, if given, of the members to admit additional members and the terms and conditions of the admissions shall be by consent of a majority of the members and subject to the terms on any Buy/Sell Agreement which may be in existence at that time.

**ARTICLE VIII — Members' Rights to Continue Business**

The right, if given, of the remaining members of the professional limited liability company to continue the business on the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the limited liability company shall be by consent of a majority of the members.

IN WITNESS WHEREOF, the undersigned has signed these Articles of Organization and acknowledged them to be her free act on this 27th day of August, 2014.

Zorayda J. Torres  
Zorayda J. Torres, MBR

State of Florida  
County of Collier

On August 27, 2014, Zorayda J. Torres, [XX] who is personally known to me, or [ ] has produced a Florida driver's license as identification, personally appeared before me at the time of notarization, and acknowledged signing these Articles of Organization of Upstream Medical Consults, PLLC, a Florida Professional Limited Liability Company.

Arlene F. Austin  
Notary Public

My Commission Expires:

(SEAL)



ARLENE F. AUSTIN  
MY COMMISSION # EE 113284  
EXPIRES: August 8, 2018  
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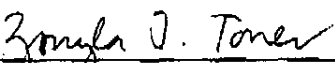
**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 605.0113, FLORIDA STATUTES, THE UNDERSIGNED PROFESSIONAL LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the professional limited liability company is: Upstream Medical Consults, PLLC.
2. The name and the Florida street address of the registered agent and registered office are:

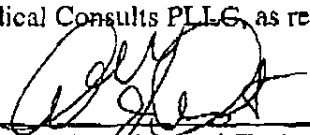
Zorayda J. Torres  
2218 Campestre Terrace  
Naples, FL 34119

Having been named as registered agent and to accept service of process for the above stated professional 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

  
\_\_\_\_\_  
Zorayda J. Torres  
Registered Agent

State of Florida  
County of Collier

On August 27 2014, Zorayda J. Torres, designated above as the individual who shall serve as the initial registered agent for Upstream Medical Consults, PLLC, who is personally known to me [XX], or produced a Florida driver's license as identification, personally appeared before me at the time of notarization, and acknowledged signing these Articles of Organization of Upstream Medical Consults PLLC, as resident agent.

  
\_\_\_\_\_  
Notary Public, State of Florida

(SEAL)



ARLENE F. AUSTIN  
MY COMMISSION # EE 113884  
EXPIRES: August 8, 2015  
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