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T. CLINE
AUG 3 1 2012
EXAMINER

## **COVER LETTER**

TO:

**Registration Section** 

Tailahassee, FL 32314

Division of Co	orporations			
SUBJECT:	Georgiy Br	usovanik MD, LLC		
Name of Limited Liability Company				
	f Amendment and fee(s) are su	•		
Please return all corresp	ondence concerning this matte	to the following:		
		Lauren Luis Name of Person		
		Name of Person		
	Geo	rgiy Brusovanik MD,	LLC	
		Firm/Company		
	1795 Daytonia Rd			
		Address		
	N	liami Beach, FL 3314	1	C
		City/State and Zip Code		
	la E-mail address: (	uren_luis@yahoo.cor to be used for future annual rep	n port notification)	2112 AUS 30
For further information	concerning this matter, please	call:	•	30
ı	_auren Luis	at ( 305 )	815-5902	
	of Person		& Daytime Telephone Number	
Enclosed is a check for	the following amount:			**
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is o		of Status &
Regist Divisi	JING ADDRESS: cration Section on of Corporations Box 6327	Registratio	f Corporations	

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Georg	iy Brusovanik M.D., L	LC			
( <u>Name of the Limited Lia</u> (A Flo	ibility Company as it now apper orida Limited Liability Company	ars on our records.) )			
The Articles of Organization for this Limited Liabilifordia document numberL1100012293		October 27, 201	1 and a	ssigned	l
This amendment is submitted to amend the following	ng:				
A. If amending name, enter the new name of th	e limited liability company h	ere:			
The new name must be distinguishable and end with the "L.L.C."	e words "Limited Liability Com	pany," the designation	"LLC" or the	abbrev	/iation
Enter new principal offices address, if applicable	e:				
(Principal office address MUST BE A STREET A	(DDRESS)				
Enter new mailing address, if applicable:			TARE BE	2912	
(Mailing address MAY BE A POST OFFICE BO	<u>X)</u>		75 (1) 	<u> </u>	
			<u> </u>	_ <u>~~</u> 	
B. If amending the registered agent and/or registered agent and/or the new registered office		our records, enter	the name	of the	new
Name of New Registered Agent:					<del></del>
New Registered Office Address:		Enter Florida street ad	Idress		
_		, Florida _			
	City		Zip Co	de	

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 MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRN	Lauren Luis	1795 Daytonia Road Miami Beach, FL 33141	✓ Add ☐ Remove
	<del>-</del> · · · · · · · · · · · · · · · · ·		Add Remove
	· · · · · · · · · · · · · · · · · · ·		Add Remove
			Add Remove
			20 Address 30
			Add Remeve
D. If an		ter change(s) here: (Attach additional sheets, if necessary.	) - CO-
		Purpose: to (1) provide administrative managem	ent
		edical practice; (2) provide consulting, expert	
,		elopment services; and (3) any other lawful busine	
	approved by the Members th	at may be conducted by limited liability companie	<u>s</u>
	under applicable Florida law.		<del></del>
Dated	August 27	, 2012	
	Kurovau	ll ND	
	Signature of	a member or authorized representative of a member	
		Georgiy Brusovanik, MD Typed or printed name of signee	<del></del>

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