

H13000118854 3
 Florida Department of State
 Division of Corporations
 Electronic Filing Cover Sheet

L1200081105

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

From: Account Name : VITALMD GROUP HOLDING
 Account Number : 120090000005
 Phone : (305) 273-4641
 Fax Number : (305) 273-0405

FILED
 13 MAY 29 AM 8:03
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****
 Email Address: morourke@femwell.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
ARMANDO E. HERNANDEZ-REY, MD LLC

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$25.00

C. LEWIS
 MAY 30 2013
EXAMINER

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RECEIVED
 13 MAY 29 AM 6:44
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Armando E. Hernandez-Rey, MD, 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:

Melissa O'Rourke
Name of Person

VitaIMD Group Holding, LLC
Firm/Company

3225 Aviation Avenue, Suite 700
Address

Miami, FL 33133
City/State and Zip Code

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

For further information concerning this matter, please call:

Melissa O'Rourke at 305, 273.4641
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

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FILED

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

13 MAY 29 AM 8:03

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Armando E. Hernandez-Rey, MD, 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 Company were filed on 10/19/12 and assigned Florida document number L12000081105

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Armando E. Hernandez-Rey, MD PLLC

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

Enter new principal office address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

2828 Coral Way

SUITE 103

Miami FL 33145

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

Aliette Hernandez-Carolan

New Registered Office Address:

606 West Flagler, Suite 202

Enter Florida street address

Miami

City

Florida

33130

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.

X Aliette Hernandez-Carolan
If Changing Registered Agent, Signature of New Registered Agent

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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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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Title	Name	Address	Type of Action
MGRM	VitalMD Group Holding, LLC	3225 Aviation Ave. Ste 700 Miami, FL 33133	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	Armando E. Hernandez-Rey, MD	6904 Veronese Street Coral Gables, FL 33146	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

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FILED

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) 13

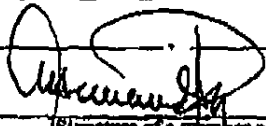
MAY 29 AM 8:03

Purpose: Medical Doctor

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Tax-ID: 45-5533280

Dated

X 

Signature of member or authorized representative of a member

Armando Hernandez-Rey, MD

Typed or printed name of signer

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Filing Fee: \$25.00

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