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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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WAIT

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MAIL

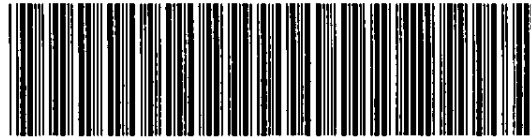
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. BRYAN

JAN - 8

EXAMINER

Law Office of Al Meyer, PA
PO Box 7001
Delray Beach, FL 33482
561-398-0634
Fax 888-818-5184
Email al@almeyerlaw.com

December 19, 2012

Registration Section
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

RE: Articles of Amendment to Articles of Organization of Essential Integrative
Medicine, LLC

Dear Sir or Madam:

Enclosed please find the Articles of Amendment for the above mentioned LLC. Please return the
filed document to my attention.

Sincerely,


Albert R. Meyer

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TALLAHASSEE, FLORIDA

Essential Intregorative Medicine, LLC

(A Florida Limited Liability Company)

This amendment is submitted to amend the following:

Essential Integrative Medicine, LLC

Enter new principal offices address, if applicable:

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

Florida

City

Zip Code

New Registered Agent's Signature, if changing Registered Agent:

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

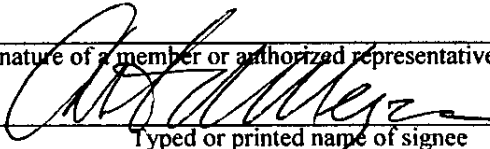
<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
			<input type="checkbox"/> Add
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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Dated _____, _____.

Signature of a member or authorized representative of a member


Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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