Division of Corporations Electronic Filing Cover Sheet

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN GARDENS THERAPY, PLLC

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FAX COVER SHEET

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COMPANY		
FAX NUMBER	18506176383	
FROM	Tony Burroughs	
DATE	2013-01-18 10:40:47 PST	
RE	FL SOS - LZ Order 505513514	

COVER MESSAGE

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2013 JAN 18 M S 10

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: GARDENS THERAPY, PLLC		
(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:		
Barbara Dang		
(Name of Person)		
Legalzoom.com, Inc.		
(Firm/Company)		
100 W. Broadway Suite 100		
(Address)		
Glendale, CA 91210	2011 SE	
(City/State and Zip Code)		1
For further information concerning this matter, please call:	IARY ASSE	poest, r
Barbara Dang at (323) 962-8600	S S	[]
(Name of Person) (Area Code & Daytime Telephone Number)	P STATE ORIDA	⁸ 0€.
Enclosed is a check for the following amount:		
(additional copy is enclosed) Certified C	of Status &	

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

2013 JAN 18 MY 8 10
SECRETARY OF STATE
SALLAHASSEE, FUURIO

GARDENS THERAPY, PLLC

(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 12/17/2012 and assigned Florida document number L12000157294

This amendment is submitted to amend the following:

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

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

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:

	(City)	(Zin Code)
		, Florida
New Registered Office Address:	(Enter Flo	rida street address)
Name of New Registered Agent:		`

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)

213-01-18 10:41:14 PST			
	313-O1-1B	10:41:14	PST

13234467473 From: Tony Burroughe

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:

	= Manager 1 = Managing Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add Remove
			2013
			<u>}</u>
			Remove Company
			Remove -
			Add Remove
			Add Remove
			Domesia
D. If a		change(s) here: (Attach additional sheets, if nece	ssary.)
	The Mailing Address shall be: 1316 13th Court, Palm Beach G	Cardone El 33410	
		nember STACEY B HODGES shall be:	
	1316 13th Court, Palm Beach G		· · · · · · · · · · · · · · · · · · ·
Dated	1/14	2013	
	Atana RH	ldup	
•	Signature of a m	nember or authorized representative of a member	
	STACEY B HODGES	Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00