## L13000017106

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
•
(Business Entity Name)
(Document Number)
,
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



300251830773

09/23/13--01017--015 \*\*30.00

2013 SEP 23 PM 1: 4.1
SECRETARY OF STATE
SECRETARY OF FLORIDA

SEP 24 2013 T CLINE

## COVER LETTER

Registration Section TO: Division of Corporations Valencia Healthcare Group, 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: Judy-Ann Smith Name of Person Valencia Healthcare Group, LLC. Firm/Company 2805 East Oakland Park Boulevard, #344 Address Fort Lauderdale, Florida 33306. City/State and Zip Code judys@valenciahealthcaregroup.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Judy-Ann Smith 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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Valencia Healthcare Group, LLC.			
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our re Liability Company)	ecords.)	
The Articles of Organization for this Limited Liability Company Florida document number <u>L13000017106</u> .			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	oility company here:		
The new name must be distinguishable and end with the words "Limi"L.L.C."	ited Liability Company," the des	signation "LLC" or the abbreviation	
Enter new principal offices address, if applicable:	2805 East Oakland Park Boulevard,		
(Principal office address MUST BE A STREET ADDRESS)	#344	-4	
	Fort Lauderdale, Flori	da 33306 음 글	
Enter new mailing address, if applicable:	2805 East Oakland P	**************************************	
(Mailing address MAY BE A POST OFFICE BOX)	#344		
B. If amending the registered agent and/or registered of	Fort Lauderdale, Flori	<u> </u>	
registered agent and/or the new registered office address her		is, enter the name of the nev	
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:

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 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 Type of Action **Title** Name **Address** Judy-Ann Smith 2881 East Oakland Park Boulevard MGRM Suite Remove Fort Lauderdale, Florida 33306. Remove Remove Remove

). If am	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
•	
• .	
د ـ ـ ـ ـ ـ	1.0
Dated	
	Signature of a member/or authorized representative of a member
	Forrest King, Jr.
	Typed or printed name of signee
	Page 3 of 3

Filing Fee: \$25.00

2013 SEP 23 PM 1: 4

E I