

L13000077303

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

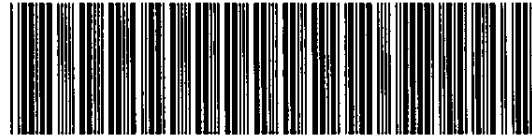
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Dr. Arroyave gave permission
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TALLAHASSEE, FLORIDA

8/22/13

[Signature]

COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: **My Doctors' Office, 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:

Robin Arroyave

Name of Person

DevelopMED, LLC

Firm/Company

9965 SW 125 Terr

Address

Miami, FL 33176

City/State and Zip Code

robinarroyave@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Efrain Arroyave, MD

Name of Person

at (**305**) **252-7921**

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

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
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Dated July 23, 2013.



Signature of a member or authorized representative of a member

Robin Arroyave

Typed or printed name of signee

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Filing Fee: ~~\$25.00~~ \$ 30.00