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Office Use Only



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B. BOSTICK OCT - 4 2013

EXAMINED

COVER LETTER

то:	Registration Sect Division of Corpo			
SUBJECT:		MARINE	DOCTORSZ, LLC	
		Name of Limite	ed Liability Company	
The en	nclosed Articles of A	mendment and fee(s) are subr	nitted for filing.	
Please	return all correspond	lence concerning this matter t	to the following:	
		G	FERARD BRUTUS	
			Name of Person	
		MARINE	DUCTORSZ, LLC Firm/Company	
			Firm/Company	
		6/31	NE 14Th AVE	Unit 4-124
			Address	
		Four	LAUDORDALE F	_ 33334_
			City/State and Zip Code OLRY BLUTUS 3F (n -1/4
		E-mail address: (to	be used for future annual report notification	
For fu	rther information cor	cerning this matter, please ca	III:	-2 SSE
	GERA	ed Beutus	at (<u>24</u>) <u>577 - 9</u> Area Code & Daytime Tele	phone Number 27 2
	Name of I	erson	Area Code & Daytime Tele	phone Number
	/			<u>,</u> • •
Enclø	sed is a check for the	following amount:		
प \$2	5.00 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

MARIN	E DOCTORSZ, LLC	
(Name of the Limited Li	ability Company as it now appears on our record	<u>is.</u>)
The Articles of Organization for this Limited Liab Florida document number	oility Company were filed on 8-05-201	and assigned
This amendment is submitted to amend the follow	ving:	
A. If amending name, enter the new name of the	he limited liability company here:	
"L.L.C." Enter new principal offices address, if applicab	ole:	ation "LLC" or the abbreviation
(Principal office address MUST BE A STREET.	ADDRESS)	20 A S
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u> </u>	BOCT -2 AHI:
B. If amending the registered agent and/or registered agent and/or the new registered office	end the following: ew name of the limited liability company here: e and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation ss, if applicable: EA STREET ADDRESS) Alicable: TOFFICE BOX) Toffice Box agent and/or registered office address on our records, enter the name of the new egistered office address here: Agent:	
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida str	eet address
	Cuy	Lip 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 **Address Type of Action** Title · <u>Name</u> JERRY BRUTUS 6131 NE 14TAV

UNIT 4124

FORT LANDORDHE FL 33334 Add Remove Remove Remove -

i amending	any other information, enter change(s) here: (Attach additional sheets, if necessary.)
<u> </u>	
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•	
ed	3pt 27. 2013.
	Caron Krutus
	Signature of a member or authorized representative of a member
	GERARD BRUTUS
	Typed or printed name of signee
	Page 3 of 3

Filing Fee: \$25.00