Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H13000209594 3)))



H130002095943ABC0

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : GASSMAN & ASSOCIATES, P.A.

Account Number : 075350000\$14 Phone : (727)442-1200

Fax Number : (727)443-5829

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.**

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN **GULF COAST ASC, L.L.C.**

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

Audit Fax# H130002095943

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

OF

SER DO RANGE GULF COAST ASC. L.L.C. (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 08/15/2013 and assigned Florida document number <u>L13</u>000115768 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 Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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:

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

Name of New Registered Agent:

New Registered Office Address:

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.

City

If Changing Registered Agent, Signature of New Registered Agent

Enter Florida street address

Page 1 of 3

H130002095943

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:

MGRM = Managing Member Title <u>Name</u> Address Type of Action 2250 DREW STREET MGR. BARBARA BRADLEY CLEARWATER, FL 33756 2238 DREW STREET ASHRAF HANNA, M.D. MGR CLEARWATER, FL 33756

MGR = Manager

H130002095943

). If amend	ing any other information, enter change(s) here: (Attach additional sheets, if necessary.)
i	
	
 -	
Sep	tember 19 2013
Jaieu	
	Signature of a member or huntorized representative of a member
	ALAN S. GASSMAN, Authorized Representative
	Typed or printed name of signee
	Page 3 of 3

Filing Fee: \$25.00

.