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OF COUNSEL:

ALAN H. PRATHER**



PORGES, HAMLIN, KNOWLES & HAWK, P.A.

March 17, 2014

Via Certified Mail

OFFICE ADDRESS 1205 MANATEE AVENUE WEST BRADENTON, FL 34205 TEL: (941) 748-3770 FAX: (941) 746-4160 www.phkhlaw.com

*BOARD CERTIFIED REAL ESTATE LAWYER

**BOARD CERTIFIED IN CITY, COUNTY AND
LOCAL GOVERNMENT LAW

+FLORIDA SUPREME COURT CERTIFIED
CIRCUIT CIVIL AND APPELLATE MEDIATOR
CERTIFIED ARBITRATOR
ALSO ADMITTED IN GEORGIA

++ALSO ADMITTED IN NEW YORK

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

Re:

Nurse Case Managers CA, LLC

Articles of Amendment

OFN: 11511-11

Dear Sir or Madame:

Enclosed please find the fully-executed Articles of Amendment for the above-referenced limited liability company. Also enclosed is a check for \$25.00 to provide payment for the filing fee. Please process the filing of the Articles as soon as possible.

If you have any questions, please do not hesitate to call me at 941.748.3770. Thank you

Jason M. DePaola Firm Principal

Émail: <u>imd@phkhlaw.com</u>

JMD:jms Enclosures (2)

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

NURSE CASE MANAGERS CA, LLC

(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 SEPTEMBER 23, 2013 and assigned
Florida document number L13000134331	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	pility company here:
The new name must be distinguishable and end with the words "Limited Lia"	bility Company," the designation "LLC" or the abbreviation "FL.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
	in the second se
E	
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	****
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her	office address on our records, enter the name of the new
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 605, 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

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager

AMBR = Authorized Member Title Type of Action Name Address **BOKE HOLDINGS, LLC MGRM** 1401 MANATEE AVENUE WEST, SUITE 600 BRADENTON, FL 34205 Remove **MGR** B ENTERPRISE ONE, LLC 1401 MANATEE AVENUE WEST, SUITE 600 BRADENTON, FL 34205 1401 MANATEE AVENUE WEST, SUITE 600 Add MGR H ENTERPRISE ONE, LLC □ Add ☐ Remove □ Add ☐ Remove ☐ Remove

. If amer	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
,	
	
(The effec	re date, if other than the date of filing:
	MARCH 12 2014
	Mw/m
	Signature of a member or authorized representative of a member
	ROBERT W. KELLY, MANAGER FOR B ENTERPRISE ONE, LLC, MEMBER
	Typed or printed name of signee

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Filing Fee: \$25.00

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