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INC.	236 East 6th Avenue . Tallahassee, Florida 32303 P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666 . Fax (850) 222-1666		
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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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Best Rehab Florida, LLC (Name of the Limited Liability Company as it now annears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on October 22, 2013 Florida document number <u>L</u>13000148283 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: **Boca Treatment Center, LLC** The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." N/A Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) N/A 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: N/A Name of New Registered Agent: N/A New Registered Office Address: Enter Florida street address

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.

City

If Changing Registered Agent, Signature of New Registered Agent

Florida_

Zip Code

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>	Name	Address	Type of Action
N/A	N/A	N/A	Add
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D. If amend	ing any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	
Dated Octo	ober 22 2013
X	Signature of a member or authorized representative of a member
•	Steven Manko, Member
	Typed or printed name of signee
	Page 3 of 3

Filing Fee: \$25.00