

OCT/01/2014 WED 09:27 AM

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FAX No.

P. 001

Florida Department of State
Division of Corporations
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**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
COMMUNITY CASE MANAGEMENT SERVICES, LLC**

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DIVISION OF CORPORATIONS
BUREAU OF COMMERCIAL
INFORMATION SERVICES

OCT - 2 2014
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**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

COMMUNITY CASE MANAGEMENT SERVICES, 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 01/30/2014 and assigned Florida document number L14000018357.

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 "L.L.C."

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:

Name of New Registered Agent:

GERSON NADAL

New Registered Office Address:

2450 HOLLYWOOD BLVD STE 301-B

Enter Florida street address

HOLLYWOOD

City

Florida

33020

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 603, 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	Name	Address	Type of Action
AMBR	GERSON NADAL	2450 HOLLYWOOD BLVD	<input checked="" type="checkbox"/> Add
		STE 301-B	<input type="checkbox"/> Remove
		HOLLYWOOD, FL 33020	
AMBR	Monica Carvajal	2450 Hollywood Blvd	<input checked="" type="checkbox"/> Add
		STE: 301-B	<input type="checkbox"/> Remove
		Hollywood, FL 33020	<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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 DANIEL A. HANSEN, FLETC/DOJ

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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

E. Effective date, if other than the date of filing: _____ (optional)
(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated SEPTEMBER 29, 2014

Signature of a member or authorized representative of a member

GERSON N'ADAL

Typed or printed name of signee

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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