

# L15000176795

Florida Department of State  
Division of Corporations  
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(((H15000280264 3)))



H150002802643ABC

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To:

Division of Corporations  
Fax Number : (850)617-6383

From:

Account Name : GASSMAN, CROTTY & DENICOLA, P.A.  
Account Number : 075350000514  
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.\*\***

Email Address: \_\_\_\_\_

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN DSM MEDICAL HOLDINGS, L.L.C.

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NOV 25 2015  
J. HARRIS

Audit Fax #  
H150002802643

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

H150002802443

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

H150002802643

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	DACELIN ST. MARTIN	4955 N. BUFFALO DRIVE	<input type="checkbox"/> Add
		BEVERLY HILLS, FL 34465	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	DSM MANAGEMENT, L.L.C.	1245 COURT STREET	<input checked="" type="checkbox"/> Add
		CLEARWATER, FL 33756	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

2025 NOV 24  
STATE OF FLORIDA  
TALLAHASSEE

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

H15000280264

E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)

Effective date, if other than the date of filing: \_\_\_\_\_ (Optional)  
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If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated Nov. 24, 2015

*[Signature]*

Signature of a member or authorized representative of a member

ALAN S. GASSMAN, Authorized Representative

Typed or printed name of signee

2015 NOV 24 AM 9:41  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

1. The first part of the document is a list of names and titles, including "The Hon. Mr. Justice" and "The Hon. Mr. Justice".

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