

116000107536

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900291975809

11/16/16--01010--003 **25.00

FILED
16 NOV 16 PM 2:41
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. SCOTT

NOV 17 2016

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Comprehensive Medical Billing, LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Richard Epstein

Name of Person

Comprehensive Medical Billing, LLC

Firm/Company

2275 S Federal Hwy Ste 330

Address

Delray Beach FL 33483

City/State and Zip Code

rick@comprehensivemb.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Richard Epstein

561 716-2108
at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed) |
|--|--|--|--|

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

FILED
16 NOV 16 PM 2:41
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

Comprehensive Medical Billing, 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 06/02/2016 and assigned
Florida document number L16000107536.

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 contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

2275 S Federal Hwy Ste 330

(Principal office address MUST BE A STREET ADDRESS)

Delray Beach FL 33483

Enter new mailing address, if applicable:

2275 S Federal Hwy Ste 330

(Mailing address MAY BE A POST OFFICE BOX)

Delray Beach FL 33483

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:

New Registered Office Address:

Enter Florida street address

Florida

City

FILED
16 NOV 16 PM 2:41
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	Bram Kane	370 Camino Gardens Blvd	<input type="checkbox"/> Add
		Suite 111	<input checked="" type="checkbox"/> Remove
		Boca Raton, FL 33428	<input type="checkbox"/> Change
MGR	Mike Nolan, LLC	14821 Tudor Chase Dr	<input type="checkbox"/> Add
		Tampa, FL 33626	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MBR	Michael Nolan	14821 Tudor Chase Dr	<input checked="" type="checkbox"/> Add
		Tampa, FL 33626	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MBR	Raul Rodriguez	403 SE 1st ST	<input checked="" type="checkbox"/> Add
		Delray Beach FL 33483	<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

FILED
16 NOV 6 PM 2:4
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

16 NOV 16 PM 2:41
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED
NOV 16 PM 2:41
16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

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.

2016

Signature of a member or authorized representative of a member

Richard Epstein

Typed or printed name of signee