

LIB000047248

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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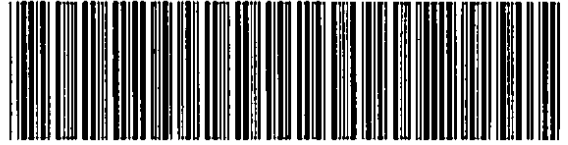
(Business Entity Name)

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: PB OBBGYN Management, 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:

Samuel Lederman, MD
Name of Person

PB OBBGYN Management, LLC
Firm/Company

4671 S. Congress Ave Ste 100-B
Address

Lake Worth, FL 33461
City/State and Zip Code

snlederman@att.net
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Vivian Viteri at (561) 434-0111 ext. 107
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- ☒ \$25.00 Filing Fee ☐ \$30.00 Filing Fee & Certificate of Status ☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) ☐ \$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

PBOBGIN Management, LLC

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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>
MGR	Vivian V Heri	4671 S. Congress Ave Ste 100B Lake Worth, FL 33461	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove <input type="checkbox"/> Change
MGR	Samuel Lederman (President)	4671 S. Congress Ave Ste 100B Lake Worth, FL 33461	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change
MGR	Joy Cavalaris (Vice-President)	4671 S. Congress Ave Ste 100B Lake Worth, FL 33461	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change
MGR	Lori Senald (Treasurer)	4671 S. Congress Ave Ste 100B Lake Worth, FL 33461	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change
			<input type="checkbox"/> Add
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Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated March 2nd, 2018



Signature of a member or authorized representative of a member

Samuel Lederman, MD

Typed or printed name of signee