

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.**

((H21000078501 3)))



H210000785013ABCY

**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.**

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

From:  
Account Name : LAZARUS CORPORATE FILING SERVICE, INC.  
Account Number : I20000000019  
Phone : (305)552-5973  
Fax Number : (305)675-5944

**\*\*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  
ONYX MEDICAL CENTER LLC**

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

**Articles of Amendment to LLC Articles of Organization of**  
Onyx Medical Center LLC

The Articles of Organization for this Limited Liability Company were filed on  
01/27/2021 and assigned Florida document number  
421000026034.

This amendment is submitted to amend the following:

Remove: Carlos Jose Martin Gomez

change all addres:

8300 West Flagler St. Ste 254 d14  
Miami FL 33144

These articles of amendment were adopted on 02/23/2021

Dated 02/23/2021

Dagmar Borroto Garcia

Signature of a member or authorized representative of a member

Dagmar

Typed or printed name of signee

New Registered Agent's Signature, if changing Registered Agent:

*I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.*

\_\_\_\_\_  
Signature of New Registered Agent, if changing