

**62100044631**

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.**

((H22000049919 3)))



H220000499193ABC3

**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  
BLUE PARADISE MEDICAL CENTER LLC**

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

2022 FEB -7 PM 4:56

ALL INFORMATION CONTAINED HEREIN IS UNCLASSIFIED

Electronic Filing Menu

Corporate Filing Menu

Help

FILED  
22 FEB -7 AM 10:37  
T. LEMIEUX  
FEB 08 2022

**Articles of Amendment to LLC Articles of Organization of**  
Blue Paradise Medical Center LLC

The Articles of Organization for this Limited Liability Company were filed on  
4/6/2021 and assigned Florida document number  
L21000144631.

This amendment is submitted to amend the following:

Remove Torres Ruiz Angel (AMBR)  
Add Julio C Brito Miranda (AMBR)  
5941 NW 173 DR UNIT # B-6  
Hiabiah FL 33015  
Remove Julio C Brito Miranda (MGR)

These articles of amendment were adopted on 2-7-22

Dated 2-7-22



Signature of a member or authorized representative of a member

Julio C Brito Miranda

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