(((H230000109793)))



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 : 120000000019 Phone : (305)552-5973 : (305)675-5944 Fax Number

**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 ANGELS CLINICAL CENTER LLC

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

Electronic Filing Menu

Corporate Filing Menu

Help

Articles of Amendment to LLC Articles of Organization of

ANGELS CLINICAL CENTER LLC

nited Liability Company were filed on igned Florida document number
ed to amend the following:
e La Caridad Baster Lahera
ndy Cabrera Bueno as sole owner
with address -11410 N Kendall Dr Suite
\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
01/06/2023
; ex
ed representative of a member
aster Lahera
name of signee
egistered Agent: familiar with and accept the obligations of the
red seemi, if changing