

L98000002642

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BLANCHARD | MERRIAM  
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ATTORNEYS AT LAW SINCE 1974

September 18, 2015

Secretary of State  
Division of Corporations  
Post Office Box 6327  
Tallahassee, Florida 32314-6327

Re: *Leesburg-Ocala Heart Institute Building, LLC*  
*Our File NO. 9113-20113*

Gentlemen:

Enclosed for filing with your office, please find the following documents:

1. Articles of Amendment to Articles of Organization
2. Dissociation or Resignation = Dr. Fong
3. Dissociation or Resignation = Dr. Dayo
4. Dissociation or Resignation = Dr. Lammermeier
5. Dissociation or Resignation = Dr. Galat
6. Dissociation or Resignation = Dr. Crouch
7. Dissociation or Resignation = Dr. Kuykendall
8. Dissociation or Resignation = Dr. Chung
9. Dissociation or Resignation = Dr. Dodd
10. Dissociation or Resignation = Dr. Evans

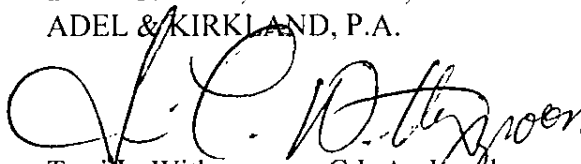
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Also enclosed is our check in the amount of \$250.00, representing the \$25.00 filing fee for each of the ten (10) enclosed documents.

Should you have any questions or if I could be of further assistance, please call.

Sincerely yours,

BLANCHARD, MERRIAM,  
ADEL & KIRKLAND, P.A.



Terri L. Witherspoon, C.L.A., Legal  
Assistant to Jose H. Cortes, Jr.

JHC/t  
Enclosures

4 Southeast Broadway  
P.O. Box 1869  
Ocala, Florida 34478

ph: 352-732-7213

fax: 352-732-0017

www.bmaklaw.com

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

Leesburg-Ocala Heart Institute Building, 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 November 10, 1998 and assigned  
Florida document number L98000002642.

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:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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**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 Zip Code

**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>
MGR	John A. Galat, M.D.	1511 SW First Avenue	<input type="checkbox"/> Add
		Ocala, FL 34471	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	R. Craig Kuykendall, M.D.	1511 SW First Avenue	<input type="checkbox"/> Add
		Ocala, FL 34471	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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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.

9/1/10, 2015  
Renee Cool MP

Signature of a member or authorized representative of a member

Typed or printed name of signee

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