

L99000006380

ACCOUNT FILING COVER SHEET

ACCOUNT NUMBER: FCA000000005

REFERENCE:
(Sub Account) _____

DATE: 11-29-99

REQUESTOR NAME: LEXIS

ADDRESS: _____

TELEPHONE: (____) (____) ext (____)

CONTACT NAME: _____

CORPORATION NAME: The Oaks Residential and Rehabilitation Center LLC.

DOCUMENT NUMBER:
(if applicable) file amendment

L99-6380

AUTHORIZATION: C. Woodyard

- ☐ CERTIFIED COPY (1-9)
☐ CERTIFICATE OF STATUS (1-9)
☒ PLAIN STAMPED COPY

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- ☒ Call When Ready
☐ Walk In
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☐ Call if Problem
☐ Will Wait

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TALLAHASSEE, FLORIDA
WR 11/29

RECEIVED
99 NOV 29 AM 11:34
SECRETARY OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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

The Oaks Residential and Rehabilitation Center

(Present Name)
(A Florida Limited Liability Company)

FIRST: The date of filing of the articles of organization was October 4, 1999.

SECOND: The following amendment(s) to the articles of organization was/were adopted by the limited liability company:

The Limited Liability Company is to be managed by the members and the name and address of the managing member is: Extendicare Health Facilities, Inc.
111 W. Michigan Street
Milwaukee, WI 53203

Dated November 23, 19 99.

Sole Member: Extendicare Health Facilities, Inc.

Timothy J. Murphy Assistant Secretary

Signature of a member or authorized representative of a member

Timothy J. Murphy

Typed or printed name of signee

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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Filing Fee: \$25.00