## P09000068175

(Re	questor's Name)	_
(Ad	dress)	
(Ad	dress)	
(Cil	y/State/Zip/Phone	e #)
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SECRETARY OF STATE DIVISION OF CORPORATIONS

NOV 0 5 2012

## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: L.S.L. MED BER: P0900006817	ICAL CENTER 5	INC
	of Amendment and fee are su		
Please return all corres	spondence concerning this mat	tter to the following:	
	ANTONIA A ROD	RIGUEZ	
		Name of Contact Persor	1
	L.S.L. MEDICAL	CENTER INC	
		Firm/ Company	
	7175 SW 8TH ST	·	
	NALABAL EL 22444	Address	
	MIAMI, FL 33144	City/ State and Zip Code	
		sed for future annual report	notification)
For further information	n concerning this matter, pleas	se call:	
ANTONIA A	RODRIGUEZ	at ( 305	<u>443-8229</u>
Name o	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	artment of State:
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
	iling Address		Address
	endment Section ision of Corporations		Iment Section on Corporations
	Boy 6327	Cliffon Building	

P.O. Box 6327 Tallahassee, FL 32314 Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## **Articles of Amendment** to Articles of Incorporation $\mathbf{of}$



## L.S.L. MEDICAL CENTER, INC.

(Name of Corporation as currently filed with the Florida Dept. of State)		
00068175		
(Document Number of Corporation (if known)		
to the provisions of section 607,1006. Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amer	dment(s)	

to

P09000068175			
(Documer	nt Number of Corporation (	if known)	,
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this	Florida Profit Corpora	ntion adopts the following amendme
A. If amending name, enter the new na	me of the corporation:		
N/A			The new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp." "Inc." or	"Co". A professional c	
B. Enter new principal office address,	if applicable:	N/A	
(Principal office address MUST BE A S		<del></del>	· · · · · · · · · · · · · · · · · · ·
			<u> </u>
		, <del></del>	<u> </u>
C. Enter new mailing address, if appli	cable:	N/A	
(Mailing address MAY BE A POST	OFFICE BOX)	19/74	
D 16			
D. If amending the registered agent an new registered agent and/or the new			ne name of the
Name of New Registered Agent	N/A	_	
Nume of New Registered Agent	7175 SW 8TH	ST STF 213	Additional Property
•		reet address)	
New Registered Office Address:	MIAMI	•	Florida 33144
New Registered Office Hadress.	(City	, ,	(Zip Code)
New Registered Agent's Signature, if c I hereby accept the appointment as regist			igations of the position.
	ζ,	•	
Si	gnature of New Registered	Agent, if changing	<del></del>

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>PT</u> <u>John</u>	Doe	
X Remove	<u>V</u> <u>Mike</u>	e Jones	
X Add	SV Sally	v Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) X Change	PSTD	ANTONIA A RODRIGUEZ	7175 SW 8TH ST
Add			SUITE 213
Remove			MIAMI, FL 33144
2) Change	VPD	NELSON ARA	782 NW 42ND AVE
, Add			SUITE 433
. X Remove			MIAMI, FL 33126
3) Change	VPD	OSMEL MARTINEZ	7175 SW 8TH ST
X	<del></del>		SUITE 213
Remove			MIAMI, FL 33144
4) Change			
Add			
Remove			
5) Change	<u></u>		
Add			
Remove			
6) Change			
Add			
Remove			

L. If amending or adding additional Articles, enter change(s) here:	
(Attach additional sheets, if necessary). (Be specific)	
N/A	
·	
·	
·	
If an amendment provides for an exchange, reclassification, or cancellation of issued shares,	
provisions for implementing the amendment if not contained in the amendment itself:  (if not applicable, indicate N/A)	
N/A	
N/A	
•	

The date of each amendment(s)	adoption: 10/30/2012
Effective date if applicable: 1	0/30/2012
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were a by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):
"The number of votes ca	st for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voung group)
☐ The amendment(s) was/were a action was not required.	adopted by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/were a action was not required.	adopted by the incorporators without shareholder action and shareholder
Dated 10/30	0/2012
Signature	
selec	a director, president or other officer – if directors or officers have not been sted, by an incorporator – if in the hands of a receiver, trustee, or other court binted fiduciary by that fiduciary)
	ANTONIA A RODRIGUEZ
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)