## 105000081437

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## **COVER LETTER**

TO: Registration Division of	on Section f Corporations				
SUBJECT: MAL	IBU HEALTHCARE LII	MITED LIABIL	ITY COMPA	NY	
	(Name of I	Limited Liability Cor	npany)		
The enclosed Articl	es of Amendment and fee(s) are s	ubmitted for filing.			
Please return all cor	respondence concerning this matt	er to the following:			
	LINDA GRUNEISE				
		(Name of Person)			
	ORGALUX LIMITED	LIABILITY CO	OMPANY		
		(Firm/Company)			
	3170 N FEDERAL I	HIGHWAY S	UITE 103-l	4	
		(Address)		<del></del>	
	LIGHTHOUSE PO	INT FL 3306	4		
		ty/State and Zip Code)			
				TAL	07
For further informat	tion concerning this matter, please	e call:		CRE	MAY
LINDA	GRUNEISEN	at ( 954	4 \ 326-7	7601 ASS	7
	(Name of Person)		ea Code & Daytime	Telephone Number	- : I [T
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Enclosed is a check for	or the following amount:			ATE RID	03
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Certified Co		\$60.00 Filing Fee, Certificate of Status &	
		(additional c	copy is enclosed)	Certified Copy (additional copy is end	closed)
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MAILING ADDRESS: STREET/CO Registration Section Registration S		FREET/COURIE egistration Section			
	Division of Corporations P.O. Box 6327  Division of Corporations Clifton Building				
	allahassee, FL 32314	26	661 Executive Cer allahassee, FL 323		

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

## MALIBU HEALTHCARE LIMITED LIABILITY COMPANY

(Present Name)
(A Florida Limited Liability Company)

	AUCUST 47, 2005		
FIRST:	The Articles of Organization were filed on AUGUST 17, 2005 and assigned document number L05000081437		
SECOND:	This amendment is submitted to amend the following:		
	EFFECTIVE AS OF MAY 15, 2007		
	CHANGE THE NAME OF THE CO	_	
	FROM "MALIBU HEALTHCARE LIMITED LIABILITY COMPANY"		
	TO "ORGALUX LIMITED LIABILITY COMPANY"		•
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	SECO	)7 HJ	
	HAS:	=======================================	marian (Sector)
Dated	18/03/07,	PH I	
	ATT.	81:1	**************************************
	Signature of a member of authorized representative of a member		
	Typed or printed name of signer		

Filing Fee: \$25.00