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(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

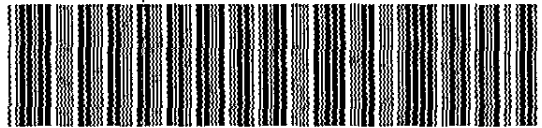
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TALLAHASSEE, FLORIDA

04 AUG 20 PM 2:45

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## TRANSMITTAL LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** HEMA DIAGNOSTIC SYSTEMS, LLC  
(Name of Limited Liability Company)

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

LUIS ALEJANDRO AGUDELO

(Name of Person)

HEMA DIAGNOSTIC SYSTEMS, LLC

(Firm/Company)

650 WEST AVENUE, SUITE 2507

(Address)

MIAMI BEACH, FLORIDA 33139

(City/State and Zip Code)

For further information concerning this matter, please call:

LUIS ALEJANDRO AGUDELO

(Name of Person)

at ( 305 ) 867-6123

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &  
Certificate of Status

☐ \$55.00 Filing Fee &  
Certified Copy  
(additional copy is enclosed)

☐ \$60.00 Filing Fee,  
Certificate of Status &  
Certified Copy  
(additional copy is enclosed)

**STREET ADDRESS:**  
Registration Section  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, Florida 32399

**MAILING ADDRESS:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

**FILED**  
04 AUG 20 PM 2:45  
TALLAHASSEE, FLORIDA

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

HEMA DIAGNOSTIC SYSTEMS, LLC

(Present Name)  
(A Florida Limited Liability Company)

**FIRST:** The Articles of Organization were filed on 12/14/2000 and assigned  
document number L00000015660.

**SECOND:** The following amendment(s) to the Articles of Organization was/were adopted by the limited  
liability company:

**CHANGE OF ADDRESS TO:**

1666 KENNEDY CAUSEWAY, SUITE 401  
NORTH BAY VILLAGE, FLORIDA 33141

**FILED**  
AUG 20 PM 2:45  
CLERK OF CIRCUIT COURT  
PALM BEACH COUNTY, FLORIDA

Dated August 19, 2004



Signature of a member or authorized representative of a member

Luis Alejandro Agudelo

Typed or printed name of signee

**Filing Fee: \$25.00**