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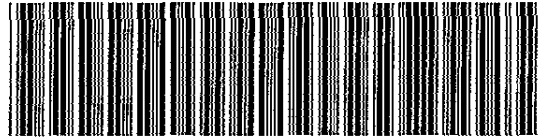
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M. HODGES

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: HEALTH MATTERS  
(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:

ROBERT G. CARDER

(Name of Person)

HEALTH MATTERS

(Firm/Company)

12381 S. ORANGE BLOSSOM TRAIL

(Address)

ORLANDO, FL 32837

(City/State and Zip Code)

For further information concerning this matter, please call:

R.G. CARDER

(Name of Person)

at ( 407 ) 852 0838

(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 &  
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(additional copy is enclosed)

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

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

**STREET/COURIER ADDRESS:**  
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

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

HEALTH MATTERS, LLC

(Present Name)  
(A Florida Limited Liability Company)

**FIRST:** The Articles of Organization were filed on 2/03/2004 and assigned document number L04000009181.

**SECOND:** This amendment is submitted to amend the following:

① REGISTERED AGENT FROM: "VANGILDER, ELIZABETH S DR." TO:

"CARDER, ROBERT G."

② MANAGER/MEMBER DETAIL:

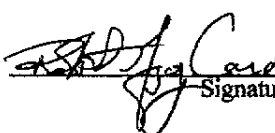

REMOTE: VANGILDER, ELIZABETH S DR 12381 S. OBT ORL FL 32837; TITLE: MGR

ADA: CARDER, ROBERT G. 12381 S. OBT ORL FL 32837; TITLE: MGR

MORALES, JULIAN C. 12381 S. OBT ORL FL 32837; TITLE: MGR

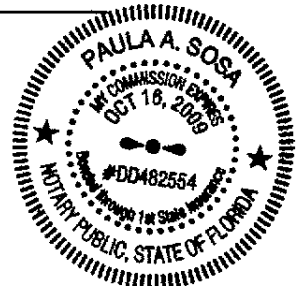
RUSH, CHRISTOPHER D. 12381 S. OBT ORL FL 32837; TITLE: MGR

Dated MARCH 24, 2006.

 Robert G. Carder /  Elizabeth S. Vangilder  
Signature of a member or authorized representative of a member

ROBERT G. CARDER / Elizabeth S. Vangilder  
Typed or printed name of signee

Filing Fee: \$25.00



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