

L04000046534

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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

J. BRYAN AUG 19 2005

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Healthcare America Associates, 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:

Jack Burstein
(Name of Person)

(Firm/Company)

701 Brickell Ave #2500
(Address)

Miami Florida 33131
(City/State and Zip Code)

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TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Jack Burstein at (305) 536 1414
(Name of Person) (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

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

HEALTHCARE AMERICA ASSOCIATES, LLC

(Present Name)
(A Florida Limited Liability Company)

FIRST: The Articles of Organization were filed on June 22, 2004 and assigned document number L04000046534.

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

The Articles of Organization are hereby amended to replace Article V with the following:

The names & addresses of the managing members are:

Title: MGRM

James J Murphy

1801 S Nova Rd

Suite 110

S Daytona, Fl 32119

Title: MGRM

Jack Burstein

701 Brickell Ave

Suite 2500

Miami, Fl 33131

Title: MGRM

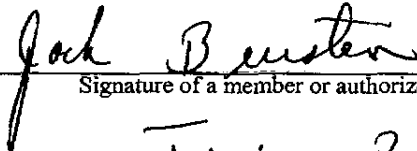
SE Investments, LLC

555 NE 15 St

Suite 100

Miami, Fl 33132

Dated August 5, 2005.



Signature of a member or authorized representative of a member

JACK BURSTEIN

Typed or printed name of signee

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TALLAHASSEE, FLORIDA

Filing Fee: \$25.00