

L05000056677

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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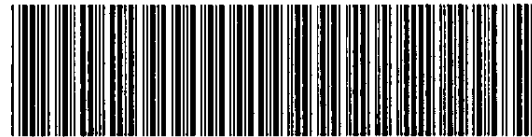
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

B. BOSTICK

JAN 25 2011

EXAMINER

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Hollywood Hills Rehabilitation Center, 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:

John Harrison Hough

Name of Person

Murphy Reid, LLP

Firm/Company

11300 U.S. Highway One, Suite 401

Address

Palm Beach Gardens, FL 33408

City/State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

John Harrison Hough

Name of Person

at ( 561 )

655-4060

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)

### 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

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TALLAHASSEE, FLORIDA

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

Hollywood Hills Rehabilitation Center, LLC

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on June 7, 2005 and assigned  
Florida document number L05000056677.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

**Enter new principal offices address, if applicable:**

**(Principal office address MUST BE A STREET ADDRESS)**

**Enter new mailing address, if applicable:**

**(Mailing address MAY BE A POST OFFICE BOX)**

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent:

New Registered Office Address:

*Enter Florida street address*

Florida

*City*

*Zip Code*

**New Registered Agent's Signature, if changing Registered Agent:**

*I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.*

**If Changing Registered Agent, Signature of New Registered Agent**

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager  
MGRM = Managing Member

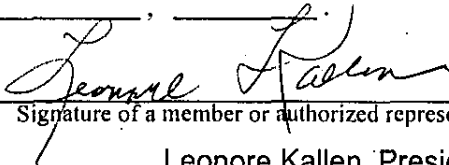
<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Leonore Kallen	400 S. Ocean Blvd. Unit 16 Boca Raton, FL 33432	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	High Ridge Management Corp.	1200 N. 35th Avenue Hollywood, FL 33021-5413	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

See Attached

Dated \_\_\_\_\_



Signature of a member or authorized representative of a member

Leonore Kallen, President

Typed or printed name of signee

**Consent of Sole Member of  
Hollywood Hills Rehabilitation Center, LLC**

The undersigned, being the sole Member of Hollywood Hills Rehabilitation Center, LLC, a Florida limited liability company, ("Company") hereby waives the requirement of a meeting and adopts the following resolutions:

**Resolved**, that the Resolutions adopted on March 10, 2009 are hereby corrected in its entirety with the following

**Resolved**, that certain Restatement of Operating Agreement of Hollywood Hills Rehabilitation Center, LLC, made effective October 1, 2007, is hereby revoked and rescinded and the Operating Agreement of Hollywood Hills Rehabilitation Center, LLC executed on January 1, 2006 (the "2006 Agreement") is reinstated.

**Resolved**, the sole Member of the Company is and always has been High Ridge Management Corp, a Florida corporation, and not Leonore Kallen, as was incorrectly stated in the 2006 Agreement.

**Resolved**, the sole Member shall have Articles of Amendment filed with the Florida Secretary of State to correct the ownership and the rights, preferences and limitations of the Membership Interests.

**Resolved**, Leonore Kallen is elected President, and Karen Kallen-Zury is elected Vice President, Secretary and Treasurer.

**Resolved**, that all past acts of the Officers of the Company are hereby approved and ratified.

Dated as of: March 10, 2009

HIGH RIDGE MANAGEMENT CORP.

BY:

  
LEONORE KALLEN, President

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