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(Business Entity Name)

LOS-123485

(Document Number)

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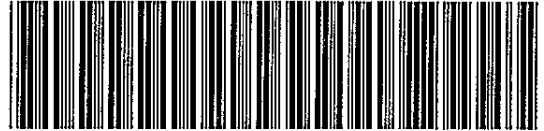
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Correction

Office Use Only

M. HODGES



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FILED
06 JAN -4 PM 2:29
TALLAHASSEE FL 32301

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Blackhawk Apalachicola, LLC

(Name of Limited Liability Company)

Dear Sir or Madam:

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

Please return all correspondence concerning this matter to the following:

Amy P. Jetel

(Name of Person)

Giordani Schurig Beckett Tackett, LLP

(Firm/Company)

100 Congress Avenue, 22nd Floor

(Address)

Austin, Texas 78701

(City/State and Zip Code)

For further information concerning this matter, please call:

Amy P. Jetel

(Name of Person)

at (512) 370-2720

(Area Code & Daytime Telephone Number)

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

\$25 Filing Fee

\$30 Filing Fee &
Certificate of Status

\$55 Filing Fee &
Certified Copy

\$60 Filing Fee,
Certificate of Status &
Certified Copy

**ARTICLES OF CORRECTION
FOR
FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY**

Pursuant to section 608.4115, F.S., this document is being submitted **within the required 30 business days** to correct the **attached** articles of organization or application to transact business in Florida.

FIRST: The name of the limited liability company is:
Blackhawk Apalachicola, LLC

SECOND: The articles of organization or the application to transact business

(CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT)

- Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows:

Article V shows the Managing Member as "Blackhawk Mangum, LLC."

The correct Managing Member is "Blackhawk Healthcare, LLC."

OR

- Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows:

Dated: December 30, 2005

Amy P. Jetel
Signature of a member or authorized representative of a member

Amy P. Jetel
Typed or printed name of signee

Filing Fee: \$25.00
Certified Copy: \$30.00 (optional)

SECRETARY OF STATE
TALLAHASSEE FLORIDA
06 JAN -4 PM 2:29

FILED

Certified Copy

I certify the attached is a true and correct copy of the Articles of Organization of BLACKHAWK APALACHICOLA, LLC, a limited liability company organized under the laws of the state of Florida, filed electronically on December 29, 2005, as shown by the records of this office

I further certify that this is an electronically transmitted certificate authorized by section 15.16, Florida Statutes, and authenticated by the code noted below.

The document number of this limited liability company is L05000123485.

Authentication Code: 051230092639-800062477148#1

Given under my hand and the
Great Seal of the State of Florida
at Tallahassee, the Capital, this the
Thirtieth day of December, 2005



A handwritten signature in black ink, appearing to read "David C. Mann".

David C. Mann
Secretary of State

**Electronic Articles of Organization
For
Florida Limited Liability Company**

L05000123485
FILED 8:00 AM
December 29, 2005
Sec. Of State
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Article I

The name of the Limited Liability Company is:

BLACKHAWK APALACHICOLA, LLC

Article II

The street address of the principal office of the Limited Liability Company is:

6836 BEE CAVES ROAD
SUITE 202
AUSTIN, TX. US 78746

The mailing address of the Limited Liability Company is:

6836 BEE CAVES ROAD
SUITE 202
AUSTIN, TX. US 78746

Article III

The purpose for which this Limited Liability Company is organized is:

ANY AND ALL LAWFUL BUSINESS.

Article IV

The name and Florida street address of the registered agent is:

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL. 33324

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Registered Agent Signature: E. A. WALLACE

Article V

The name and address of managing members/managers are:

Title: MGRM
BLACKHAWK MANGUM, LLC
6836 BEE CAVES ROAD, SUITE 202
AUSTIN, TX. 78746

Signature of member or an authorized representative of a member

Signature: AMY P. JETEL

L05000123485
FILED 8:00 AM
December 29, 2005
Sec. Of State
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