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08 MAY -5 PM 4: 40

T. HAMPTON

MAY - 6 2008

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: SENIOR RESOURCE 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:
(Name of Person) SRC FINANCIAL LLC SENIOR RESOURCE CENTER LLC (Firm/Company)
(Firm/Company) 11011 SHERIDAN ST. SUITE 305 (Address)
COOPER CITY FL 33026 (City/State and Zip Code)
For further information concerning this matter, please call:
ART ATH AMAS at (954) 783-0233 (Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount: \$25.00 Filing Fee \$\ \text{S55.00 Filing Fee & Certificate of Status}\$ \$55.00 Filing Fee \$\ \text{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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

DIVISION OF CORPORATIONS

DIVISION OF CORPORATIONS

	OF		R 2000
SENJOR RESONATE (A	DURCE CENTER L Liability Company as it now appears of Florida Limited Liability Company)	on our records.)	PH 4: 4
The Articles of Organization for this Limited Li Florida document number 20 474888	ability Company were filed onMA	14 1 200	and assigned
This amendment is submitted to amend the follo	owing:		
A. If amending name, enter the new name of			
The new name must be distinguishable and end with "L.L.C." B. If amending the registered agent and/o	h the words "Limited Liability Company or registered office address on our		
registered agent and/or the new registered of	fice <u>address here</u> :		
Name of New Registered Agent:	***************************************	· · · · · · · · · · · · · · · · · · ·	
New Registered Office Address:	11011 SHERIDAN	STREET	Suite 305 address)
	COOPER CITY	, Florida .	33026
	(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

<u> Fitle</u>	Name	Address	Type of Action
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). If amen	ding any other information, enter ch	hange(s) here: (Attach additional sheets, if necessary.)	SECRETARY OF CONTINUE OF CONTI
·			-S PH 4:41
Dated	May I	200 €.	- - 6 6
	N	yped or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00