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(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	<del>;</del> #)
PICK-UP	☐ WAIT	MAIL
(Bu:	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
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08/23/06--01014--011 \*\*25.00

SECRETARY CORPORATIONS
OF AUG 23 PM 1: 25

J. BRYAN AUG 2 4 2006

# **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: The Healthy Montgage Group, LLC (Name of Limited Liability Company)	
The enclosed Articles of Amendment and fee(s) are submitted for filing.	ONVISE SE SE
Please return all correspondence concerning this matter to the following:	ALG REAL REAL REAL REAL REAL REAL REAL REAL
Gary Goglia  (Name of Person)  The Healthy Mortgage Group, LLC  (Firm/Company)  370 Mars Ave  (Address)  Teguesta, FL 33469  (City/State and Zip Code)	NVISION OF CORPORATIONS OF AUG 23 PM 1: 25
For further information concerning this matter, please call:	
(Name of Person) at (561) 746-2239 (Name of Person) (Area Code & Daytime Telephone Number)	
Enclosed is a check for the following amount:  \$25.00 Filing Fee \$ \$55.00 Filing Fee & Certificate of Status (additional copy is enclosed)  \$260.00 Filing Fee & Certificate of Status (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

	The Healthy Mortgage Group LLC. 8
	(Present Name) (A Florida Limited Liability Company)
FIRST:	The Articles of Organization were filed on 06-15-06 and assigned document number LOGODOGIGIS
SECOND:	This amendment is submitted to amend the following:
	Please remove Carrie Goglia as
	managing member and owner
	of The Healthy Mortgage Group, LLC.
	Gary Goglia remains MGR and now
	100% owner Carrie Goglia is no
	longer involved in any capacity to the Healthy Mortgage Group, LLC.
	Healthy Mortgage Group, LLC.
Dated	08-20 , 2006.
	- Haus John
	Signature of a member or authorized representative of a member
	Gary Goglia
	Typed or printed name of signee

Filing Fee: \$25.00