L06.000077931

(Requestor's Name)
(Address)
·
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Dusiness Entry Name)
·
(Document Number)
Certified Copies Certificates of Status
n en
Special Instructions to Filing Officer:
SW
1000 W/ (7)
1789 615 671

Office Use Only

L06-7037



300108095383

08/16/07--01013--019 **30.00



COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Neuro Audiology Consultants, L.L.C. (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:
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Adam Locker (Name of Person)
Neuro-Audiology Consultants, L.L.C.
7301 A W. Palmetto Park Rd., Str. 202C
Boca Raton FL 33433 (City/State and Zip Code)
For further information concerning this matter, please call:
. Adam or Aggie at (561) 742-9880 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\int \\$30.00 Filing Fee & \int \\$55.00 Filing Fee & \int \\$60.00 Filing Fee,

MAILING ADDRESS:

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

STREET/COURIER ADDRESS:

Certified Copy

(additional copy is enclosed)

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

(additional copy is enclosed)



FLORIDA DEPARTMENT OF STATE Division of Corporations

August 17, 2007

ADAM LOCKER 7301 A W. PALMETTO PARK RD. STE 202C BOCA RATON, FL 33433

SUBJECT: NEURO-AUDIOLOGY CONSULTANTS, L.L.C.

Ref. Number: L06000077931

We have received your document for NEURO-AUDIOLOGY CONSULTANTS, L.L.C. and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain written acceptance by the registered agent, (i.e. "I hereby am familiar with and accept the duties and responsibilities as registered agent for said corporation/limited liability company"); and the registered agent's signature.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6097.

Letter Number: 907A00050135

Marsha Thomas Document Specialist

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Meuro-Audiology Consultants, L.L.C.
(Russent Name)
(A Florida Limited Liability Company)

FIRST: SECOND:	The Articles of Organization were filed on 08/07/2006 and assigned document number L06000077.931 This amendment is submitted to amend the following: The Remove: Roberta Randel Mux to resignation	OT AUG 30 PH 3: 14 SECRETARY OF STATE
	+ Remove Registered Agent: Jeffrey Eisensmith	tology year. tology
	and relace with [Adam Locker	
se atta		<u></u>
	Boynton Beach, FL 33437	
Dated	August 27, 2007.	e e e e e e e e e e e e e e e e e e e
	Signature of a member of authorized representative of a member Adam Locker Typed or printed name of signee	en e

Filing Fee: \$25.00



August 27, 2007

Florida Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

RE: Registered Agent for

Neuro-Audiology Consultants, L.L.C.

Ref. Number L06000077931

To Whom It May Concern:

I Adam Locker am familiar with and accept the duties and responsibilities as registered agent for the above mentioned Limited Liability Company.

Adam Locker