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## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: PLANTATION PROFESSIONAL GROUP, 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:

SUSAN RAPPOLI, CLA

(Name of Person)

HARVEY L. RUBINCHIK, P.A.

(Firm/Company)

1860 N.Pine Island Road #118

(Address)

Plantation, FL 33322

(City/State and Zip Code)

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TALLAHASSEE FLORIDA

For further information concerning this matter, please call:

Susan Rappoli

(Name of Person)

954

at (

476-7030

(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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(Firm/Company)

1860 N. Pine Island Road #118

(Address)

Plantation, FL 33322

(City/State and Zip Code)

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TALLAHASSEE, FLORIDA

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Clifton Building  
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Tallahassee, FL 32301

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

PLANTATION PROFESSIONAL GROUP, LLC, a Florida Limited  
Liability Company \_\_\_\_\_  
(Present Name)  
(A Florida Limited Liability Company)

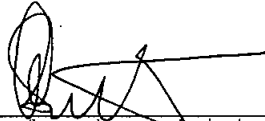
**FIRST:** The Articles of Organization were filed on 8/18/06 and assigned  
document number L06000082190.

**SECOND:** This amendment is submitted to amend the following:

to add Nigel D. Grandison as a 50% managing member  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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TALLAHASSEE, FLORIDA

Dated November 29, 2006, \_\_\_\_\_

  
\_\_\_\_\_  
Signature of a member or authorized representative of a member  
**AUSTIN F. SMITH**

\_\_\_\_\_  
Typed or printed name of signee

**Filing Fee: \$25.00**