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SECRETARY OF STATE
DIVISION OF CORPORATIONS

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## **COVER LETTER**

C		
SUBJECT:	orporate Benefit Advisors LLC	<u> </u>
	(Name of Limited Liability Company)	
The enclosed Articles	of Amendment and fee(s) are submitted for filing.	
Please return all corres	spondence concerning this matter to the following:	
-	Karl Nembach (Name of Person)	
_	Corporate Benefit Advisors (Firm/Company)	
-	65 N.E. 4th Ave. #A	DIVI <b>200</b> 0
_	Delray Beach, FL 33483 (City/State and Zip Code)	ECRETARY SION OF CO
For further information	n concerning this matter, please call:	OF STAT
Karl	(Name of Person) at (56/) 60/. 4/	4/ 5 2 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	(and code a payame reception in	· · · · · · · · · · · · · · · · · · ·
Enclosed is a check for th	e following amount:	
\$25.00 Filing Fee	-	Filing Fee,

### MAILING ADDRESS:

TO:

Registration Section

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

Corporate Benefit Advisors LLC
(Present Name)
(A Florida Limited Liability Company)

The Articles of Organization were filed on	
This amendment is submitted to amend the following:  Please update the Manager/Member Defail to reflect the following:	
Name & Address: Title: Sign Member Managing Member	SECRETAR'
Delray Beach, FL 33483	ED OF STATE
(See Attached Document Printed off the Div. of Corp. website.)	
12/1/06	
Signature of a member or authorized representative of a member  Karl Nembach  Typed or printed name of signee	
	This amendment is submitted to amend the following:    Please update the Manager / Member Defail     to reflect the following:    Name & Andress: Title: Start Nembach   Managing Member

Filing Fee: \$25.00