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SECRETARY OF STATE FALLAHASSEE, FLORIDA

## **COVER LETTER**

Division of Corporations						
SUBJECT:	Riverpointe Group, LLC					
SUBJECT:	(Name of Limited Liability Company)					
The enclosed Articles of Amendment and fee(s) are submitted for filing.						
Please return all corr	respondence concerning this matter to the following:					
	Took Comm					
Jack Gomm (Name of Person)						
	(Timila of Fation)					
	Riverpointe Group, LLC					
	(Firm/Company)					
	11713 Highland Place					
	(Address)					
	(Addices)					
	Coral Springs, FL 33071					
	(City/State and Zip Code)					
For further informati	ion concerning this matter, please call:					
••••••••••••••••••••••••••••••••••••••	Jack Gomm at (305) 552-3500 (Name of Person) (Area Code & Daytime Telephone Number)					
	(Name of Person) (Area Code & Daytime Telephone Number)					
Enclosed is a check for	r the following amount:					
X \$25.00 Filing Fee	\$30.00 Filing Fee & \$55.00 Filing Fee & \$60.00 Filing Fee,					
	Certificate of Status Certified Copy Certificate of Status &  (additional copy is enclosed) Certified Copy					
	(additional copy is enclosed)					
	AILING ADDRESS: STREET/COURIER ADDRESS:					
Re	gistration Section Registration Section					

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

TO:

Registration Section

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	Riverpointe Group, LLC		
	(Present Name) (A Florida Limited Liability Company)		
FIRST:	The Articles of Organization were filed on <u>February 15, 2007</u> and assigned document number, <u>L07000017721</u> .		
SECOND:	This amendment is submitted to amend the following:		
	Please add Edward H. McCluskey as a Member-Manager	<u>.                                    </u>	
		<del></del>	
		<del></del>	
		<del></del>	
Dated	May 29 , 2007 . ∑∽	200	
	LAHASSEE Dan		M
	Signature of a member of authorized representative of a member	P# 4: 09	
	Jack Gomm RA	20 :	_
	Typed or printed name of signee	_	

Filing Fee: \$25.00