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EXAMINER

008 JAN IO PM 4: 21
SECRETARY OF STATE

COVER LETTER

O: Registration Section Division of Corporations				
UBJECT: H.B. GOLDBERG & ASSOCIATES, 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:				
Linear D. Coddhana				
Henry B. Goldberg (Name of Person)				
The Joank Group, LLC				
(Firm/Company)				
1421 Sunnyside Drive				
(Address)				
Maitland FL 32751-6555				
(City/State and Zip Code)				
or further information concerning this matter, please call:				
lenry B. Goldberg at (407) 628 4840 CELL 4074480508				
(Name of Person) (Area Code & Daytime Telephone Number)				
nclosed is a check for the following amount:				
\$25.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed) \$50.00 Filing Fee & S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	osed)			
MAILING ADDRESS: Registration Section Division of Corporations STREET/COURIER ADDRESS: Registration Section Division of Corporations				
P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301				

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

H.B. GOLDBERG & ASSOCIATES, LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on 2007 and assigned Florida document number <u>L0700</u>0063558 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The Joank Group, LLC The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: (Enter Florida street address) Florida_

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

(City)

(If Changing Registered Agent, Signature of New Registered Agent)

AHASSEE TARY OF STATE

Page 1 of 2

Page 1 of 2

If amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Ma MGRM = N	nnager Managing Member		
<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
			· Add Remove
			Add Remove
			AddRemove
	- 1 1 1 1 1 1 1 1 1 1 		Add Remove
			Add Remove
			AddRemove
D. If amen	ding any other information, enter	change(s) here: (Attach additional sheets, if ne	cessary.)
— — Dated 6 JA	NUARY 2008 ,		
Dated 5 37	Ideny R	Solclory nember or authorized representative of a member	2008 JI SECR
	Henry B. Goldberg		
		Typed or printed name of signee	SST O
		Page 2 of 2	
		Filing Fee: \$25.00	FLOR