

L 18000004087

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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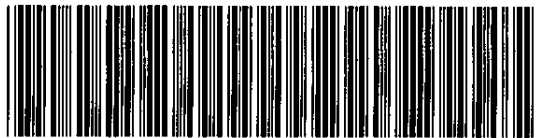
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JAN 23 2009

EXAMINER



500139982785

01/12/09--01008--008 **25.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATION
09 JAN 22 AM 10:32

Sign

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: HBA South Florida, 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:

James A. Forsythe, Registered Agent
(Name of Person)

HBA South Florida, LLC
(Firm/Company)

1164 E. Oakland Park Blvd #306
(Address)

Oakland Park, FL 33334
(City/State and Zip Code)

For further information concerning this matter, please call:

James A. Forsythe, Registered Agent at (954) 903-4780
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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

From:

01/20/2009 13:53 #121 P.003/004

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
09 JAN 22 AM 10:32

HBA South Florida, 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 1/14/2008 and assigned
Florida document number L08000004087

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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)

(City), Florida (Zip Code)

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.

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

From:

01/20/2009 13:53

#121 P.004/004

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

MGR = Manager

MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	ALR Consulting, LLC	1164 E Oakland Park Blvd	<input checked="" type="checkbox"/> Add
		Oakland Park, FL 33334	<input type="checkbox"/> Remove
MGR	Robert A. Blair	1164 E Oakland Park Blvd	<input checked="" type="checkbox"/> Add
		Suite 307	<input type="checkbox"/> Remove
		Oakland Park, FL 33334	<input type="checkbox"/>
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Change Anthony Ricciardo from MGRM to MGR

Dated January 8

, 2009


Signature of a member or authorized representative of a member

James A. Forsythe, Registered Agent

Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00