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**Division of Corporations**  
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**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN**  
**HEALTH SPHERE, LLC**

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Corporate Filing Menu

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MAY - 5 2010

**EXAMINER**

5/4/2010

RECEIVED  
 10 MAY -4 PM 4:54  
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RECEIVED  
 SECRETARY OF STATE  
 DIVISION OF CORPORATIONS  
 10 MAY -4 AM 9:59

H10000109274

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

HEALTH SPHERE, 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 03/13/2008 and assigned  
Florida document number L08000026685

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:

LIDA CIFUENTES

New Registered Office Address:

2900 GLADES CIRCLE STE 1450

Enter Florida street address

WESTON

City

Florida

33327

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:

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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	VICTOR G CRISTHIAN R	2900 GLADES CIRCLE STE 1450 WESTON, FL 33327	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	LIDA CIFUENTES	2900 GLADES CIRCLE STE 1450 WESTON, FL 33327	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<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.)

Dated May 04th 2010

Signature of a member or authorized representative of a member

VICTOR G. CRISTHIAN R.

Typed or printed name of signee

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