08000026929

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

Office Use Only



400120516824

03/31/08--01047--025 **50.00

SECRETARY OF STATE STATE OF CORPORATIONS OF CORPORATIONS

J. BRYAN

. APR -1 2008

EXAMINER

COVER LETTER

TO:

Registration Section

Tallahassee, FL 32314

Division of Co	rporations			
HYGEA	BILLING AND MANAG	SED SERVICES LLC		
SUBJECT: HYGEA BILLING AND MANAGED SERVICES, LLC (Name of Limited Liability Company)				
The enclosed Articles of	f Amendment and fee(s) are sul	bmitted for filing.		
Please return all corresp	ondence concerning this matter	r to the following:		
	LACY LOAR			
		(Name of Person)		
	CAT'S PAW CORPO	DRATE CONSULTANTS, INC.	CT)	
		(Firm/Company)	OB MAR 31 PH 4: 00	
	OOCO DARTMOUTU	AV/P AI	善窮	
2060 DARTMOUTH AVE. N. (Address)				
		Canada,	P	
	ST. PETERSBURG		THE ORIGINAL STATES	
		(City/State and Zip Code)	*:	
For further information	concerning this matter, please o	eall:	6 7	
LACY LOAR		at (727) 798-9812		
***************************************	of Person)	(Area Code & Daytime Telephone Number)	_	
Enclosed is a check for	the following amount:			
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & \$60.00 Filing Fee Certified Copy (additional copy is enclosed) Certified Copy (additional copy (addition	Status &	
MAILING ADDRESS: Registration Section Division of Corporations		STREET/COURIER ADDRESS: Registration Section Division of Corporations		
P.O. Box 6327		Clifton Building		

2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION OF

HYGEA BILLING AND MANAGED SERVICES, LLC

(Name of the Limited L. (A F	lorida Limited Liability Company)	08 and assigned
The Articles of Organization for this Limited Liab	oility Company were filed on 3/14/20	08 and assigned
Florida document number <u>L08000026929</u>	·	90
This amendment is submitted to amend the follow	ing:	
A. If amending name, enter the new name of t	ne limited liability company here:	
The new name must be distinguishable and end with "L.L.C."	he words "Limited Liability Company," t	the designation "LLC" or the abbreviation
B. If amending the registered agent and/or registered agent and/or the new registered office		ecords, <u>enter the name of the new</u>
Name of New Registered Agent:		
New Registered Office Address:		
	(Enter Florida street address)	
		, Florida(Zip Code)
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Re-	zistered Agent:	
I hereby accept the appointment as registered the provisions of all statutes relative to the pro- accept the obligations of my position as registe being filed to merely reflect a change in the re- company has been notified in writing of this ch	per and complete performance of my ered agent as provided for in Chapte gistered office address, I hereby conj	y duties, and I am familiar with and r 608, F.S. Or, if this document is
	(If Changing Desistant Agent Si	ometure of New Registered Agent)

. 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 Address **Type of Action Title** Name 7925 NW 12th ST **WANG CAPITAL √** Add MGRM Remove SUITE 321 MIAMI, FLORIDA, 33126 ☐ Add Remove Add Remove Add Remove Add Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) New address submitted via email on March 28, 2008 7925 NW 12th St. Suite 321 Miami, Florida 33126 Dated March 28 2008

Typed or printed name of signee
Page 2 of 2

Lacy Loar

Filing Fee: \$25.00

Signature of a member or authorized representative of a member