

LO80000065038

Florida Department of State
Division of Corporations
Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

SELLERS

FEB 19 2009

((H09000037694 3)))



H090000376943ABC5

EXAMINER

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : CASEY CIKLIN LUBITZ MARTENS & O'CONNELL
Account Number : 076376001447
Phone : (561) 832-5900
Fax Number : (561) 833-4209

46279

RECEIVED

09 FEB 18 PM 12:32

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

LLCAMND/RESTATE/CORRECT OR M/MG RESIGN

THE NORTHEAST GROUP LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

FILED
TALLAHASSEE, FLORIDA

09 FEB 18 AM 8:45

Electronic Filing Menu

Corporate Filing Menu

Help

RA

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

The Northeast Group 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 September 08, 2008 and assigned
Florida document number L08000085038

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)

09 FEB 18 AM 8:45

FILED

STATE
OF
FLORIDA

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:

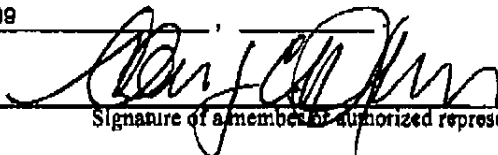
MGR = Manager

MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Kenneth Buckley	c/o Alan J. Ciklin, Esq. - Casey Ciklin Lubitz 515 N. Flagler Drive, Suite 1700 West Palm Beach, FL 33401	<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
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

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

Dated February 18, 2009



Signature of a member or authorized representative of a member

Alan J. Ciklin, Authorized Representative

Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00

FILED
09 FEB 18 AM 8:45
TALLAHASSEE, FLORIDA