L08000085060

(Requ	uestor's Name)	
(Addr	ess)	
. (Addr	ess)	
. (City/:	State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Busi	ness Entity Na	me)
(Docu	ıment Number)	
Certified Copies	Certificate	s of Status
Special Instructions to Fi	ling Officer:	

Office Use Only



300225139533

03/26/12--01028--013 **30.00

TILE IN 12 HAR 26 AH II: 31
SECRETARY OF STATE

B. BOSTICK
MAR 28 2012
EXAMINER

COVER LETTER

TO:

TO:	Registration Secti Division of Corpo				
SUBJE	CT:	The Institute	for Holistic Healing, L	.LC	
		Name of L	imited Liability Company		
The enc	losed Articles of An	nendment and fee(s) are	submitted for filing.		
Please r	eturn all correspond	ence concerning this ma	tter to the following:		
		Janine M	. Cimino, Personal Repre	esentative	
			Name of Person		
			Firm/Company	<u> </u>	
		20	070 Homewood Blvd. #40	09	
		Do	elray Beach, Florida 334	45	
			City/State and Zip Code		12 HB SEUR FALLA
	-		s: (to be used for future annual repor	t notification)	12 MAR 26 AH II: 3 SEURLIARY OF STAT ALLAHASSEE, FLORI
for furth		cerning this matter, pleas			AHII
	Janine Name of Pe	M. Cimino	at (561) Area Code & I	706-6278 Daytime Telephone Number	II: 31
				,	A
	is a check for the f				
\$25.0	00 Filing Fee	\$30:00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is end	closed) Certified	te of Status &
	Registration Division o P.O. Box 6	f Corporations	Registration (Division of C Clifton Build	Corporations ing ve Center Circle	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

The Institute for Ho	listic Healing, LLC
(Name of the Limited Liability Compa (A Florida Limited I	iability Company)
The Articles of Organization for this Limited Liability Company Florida document numberL0800088060	were filed on 9/16/2008 and assigned
This amendment is submitted to amend the following:	
A. If amending name, <u>enter the new name of the limited liab</u>	ility company here:
The new name must be distinguishable and end with the words "Limi "L.L.C."	ted Liability Company," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	2070 Honewood Blud #
(Principal office address MUST BE A STREET ADDRESS)	Delray Beach Fl 3344 409
Enter new mailing address, if applicable:	2070 Honewood Blud. #40
(Mailing address MAY BE A POST OFFICE BOX)	Delray Beach FL 3344T
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here	
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	City Zip Code
New Registered Agent's Signature, if changing Registered Agent:	City Zip Code
new registered agent's Signature, it changing registered agent;	

If Changing Registered Agent, Signature of New 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 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>	Address	Type of Action
Mgrm	Lester David Berger, Jr.	22865 Ironwedge Drive Boca Raton, Florida 33433	Add 7 Remove
<u>mgrm</u>	Janine M. Cimino	2070 Homewood Blvd. Delray Beach, Florida 33445	Add Remove
•	·		Add Remove
			Add
			Add Remove
	·		Add Remove
D. If amendi	ng any other information, enter change	e(s) here: (Attach additional sheets, if necessar	
			12 HAR SEURE
			AR 26 AH
Dated 3/2	Jan .	lessonal Representative	CORRECTION OF THE PARTY OF THE
	// Janine M. Cimin	or authorized representative of a member pure .0 .0 .0 .0 or printed name of signee	school to attracted there of Administrate

Page 2 of 2

Filing Fee: \$25.00

IN THE CIRCUIT COURT, IN AND FOR PALM BEACH COUNTY, FLORIDA

IN RE: ESTATE OF

LESTER DAVID BERGER, JR. Deceased.

DIVISION:

PROBATE DIVISION

CASE NO. 502011CP007539XX

LETTERS OF ADMINISTRATION (single Personal Representative)

TO ALL WHOM IT MAY CONCERN:

WHEREAS, LESTER DAVID BERGER, JR., a resident of Palm Beach County, Florida, died on July 9, 2011, owning assets in the State of Florida; and

WHEREAS, JANINE M. CIMINO has been appointed Personal Representative of the estate of the decedent and has performed all acts prerequisite to issuance of Letters of Administration in the estate,

NOW, THEREFORE, I, the undersigned Circuit Judge, declare JANINE M. CIMINO to be duly qualified under the laws of the State of Florida to act as Personal Representative of the estate of LESTER DAVID BERGER, JR., deceased, with full power to administer the estate according to law; to ask, demand, sue for, recover and receive the property of the decedent; to pay the debts of the decedent as far as the assets of the estate will permit and the law directs; and to make distribution of the estate according to law.

ORDERED	on		FEB 0 8 2012
			JUDGE ROSEMARIE SCHER
			COTIPT TITICE