

LD8000108011

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(City/State/Zip/Phone #)

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OCT - 8 2009

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: LION HEART HEDGE FUND 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:

EUGENE H STEELE ESQ

Name of Person

LAW OFFICES

Firm/Company

P.O. 30212

Address

FORT LAUDERDALE FL 33303

City/State and Zip Code

MD@LIONHEARTMANAGERS.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

EDWARD DENIGRIS

Name of Person

at (954)

8827072

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 &
Certified Copy
(additional copy is enclosed)

☐ \$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

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

LION HEART HEDGE FUND 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 NOVEMBER 20, 2008 and assigned Florida document number L08000108011.

This amendment is submitted to amend the following:

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

LION HEART MANAGERS LLC

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)

1700 EAST LAS OLAS BLVD. SUITE 207

FORT LAUDERDALE

FLORIDA 33301

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

1700 EAST LAS OLAS BLVD. SUITE 207

FORT LAUDERDALE

FLORIDA 33301

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:

EDWARD DENIGRIS

New Registered Office Address:

1700 EAST LAS OLAS BLVD. SUITE 207

Enter Florida street address

FORT LAUDERDALE

, Florida

City

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TALLAHASSEE FLORIDA

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.

[Signature]
If Changing Registered Agent, Signature of New Registered Agent

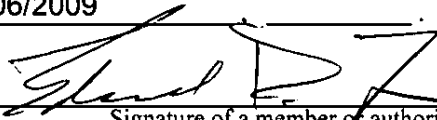
If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	PAUL GERACI	233 COMMERCIAL BLVD SUITE B LAUDERDALE BY THE SEA FLORIDA 33308	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	WILLIAM D DYER	PO 2464 POMPANO BEACH FLORIDA 33061	<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 10/06/2009



Signature of a member or authorized representative of a member

EDWARD DENIGRIS

Typed or printed name of signee

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 TALLAHASSEE FLORIDA