LD8000111U45

(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:

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MAY 27 2011

EXAMINER

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AND APACESES IN DRIPA

COVER LETTER

TO:	Registration S Division of Co							
SUBJE	SUBJECT: Better Health Beverage, LLC							
	<u> </u>		ed Liability Company					
The en	closed Articles of	'Amendment and fee(s) are sub	mitted for filing.					
Please	return all correspo	ondence concerning this matter	to the following:					
			Ilene Ratner Name of Person	_				
Name of Letson								
Friedman			Rosenwasser and Goldbaum Firm/Company	_				
			гип/Сопрану					
5355 Tow			wn Center Road, Suite 801	_				
			Address					
		В	oca Raton, FL 33486					
			City/State and Zip Code					
		E-mail address (ratner@frglaw.com be used for future annual report notification)					
For fur	ther information of	concerning this matter, please c						
	II	ene Ratner	at (561) 395-5511					
	Name o	f Person	Area Code & Daytime Telephone Numb	er				
Enclose	ed is a check for t	he following amount:						
□ \$2 <i>5</i>	.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	(additional copy is enclosed) Certifie	iling Fee, ate of Status & d Copy anal copy is enclosed)				
	Registr Divisio P.O. B	ING ADDRESS: ration S. Ition on of Corporations ox 6327 assee, 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**

Better Health Beverage, 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 Li Florida document number L08000111	ability Company were filed on						
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 wit "L.L.C."	h the words "Limited Liability Company	"the designation "LLC" or the abbreviation					
Enter new principal offices address, if applic	able:						
(Principal office address MUST BE A STREE	T 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:	Richard Kayne						
New Registered Office Address: 4800 N. Federal Highway, Suite 300B							
	Enter	Florida street address					
	, Florida33451						
City Code							
New Registered Agent's Signature, if changing B	egistered Agent:	→					
I hereby accept the appointment as registered the provisions of all statutes relative to the pr accept the obligations of my position as regis	oper and complete performance of	my duties, and I am familiar with and					

If Changing Registered Agent, Signature of New Registered Agent

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>	<u>Address</u>	Type of Action
Mgr	Sasson Moulavi	591 Philips Drive Boca Raton, FL 33432	Add ✓ Remove
<u></u>	.		Add Remove
			Add Remove
***************************************			Add Remove
			AddRemove
			Add Remove
D. If amer	nding any other information	, enter change(s) here: (Attach additional sheets, if necessa	iry.)
			<u> </u>
-			
Dated	May 17		
	Signatu	re of a member or authorized representative of a member	
	3	·	
		Richard Kayne Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00