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Certified Copies	_ Certificates	of Status		
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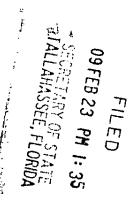


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B. KOHR

FEB 2 3 2009

EXAMINER





ACCOUNT NO. : 072100000032

REFERENCE: 899821 7691571

AUTHORIZATION (

COST LIMIT

ORDER DATE: February 20, 2009

ORDER TIME : 4:48 PM

ORDER NO. : 899821-005

CUSTOMER NO: 7691571

DOMESTIC AMENDMENT FILING

NAME: HEALTH DESK LLC

XX ARTICLES OF AMENDMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Kimberly Moret -- EXT# 2949

EXAMINER'S INITIALS:

ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION **OF**

Health Desk LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) assigned

The Articles of Organization for this Limited Liability Company were filed on 02/13/2009 Florida document number $\underline{L0}9000014847$

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 word "L.L.C."	ds "Limited Liability Company," t	he designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDR.	ESS)	
Enter new mailing address, if applicable:		
(Moiling address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered agent and/or the new registered office addr		ecords, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:	(Enter F	lorida street address)
		, Florida
	(City)	(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)

If amending the Managers or Managing Memhers 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
mgrm	Latha Chandrasekaran	c 4 Power Apartments 25 Zakaria Colony Main Rd. Choolaimedu Chennai 600094 Tamil Nadu India	Add Remove
mgrm_	Lalitha Alagaratnam	No 3 Jalan 6/20 Petaling Jaya Selangor 46000 Malaysia	Add Remove
<u>mgrm</u>	Murugesan Sundaresan	4/9 I Street Gandhi Nagar Tiruvannamalai 606601 Tamil Nadu India	Add Remove
			Add Remove
			☐ Add ☐ Remove
			Add Remove
D. If amendia	ng any other information, enter change	(s) here: (Attach additional sheets, if necessary.)	_
			- -
Dated	2/20, 2009 Signature of a member 1	Alexant	J
	Sothy Ala		<u>.</u>

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