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AND ANALYSEE, FLORIO.

T. CLINE
SEP - 3 2009
EXAMINER

· COVER LETTER

TO: Registration Division of C					
SUBJECT:	My He	p Station LLC			
	Name of Limi	ted Liability Company	,	•	
	of Amendment and fee(s) are sul	-			
		Rafael Bohorquez			
	,	Name of Person	•		
		My Help Station LLC			
		Firm/Company			
	20	4 W. Sabal Palm Place			
		Address		- <u>-</u>	
	, 	Longwood, FL 32779		2019 SEP -2 TALLAH ASSI	-17
		City/State and Zip Code		THE P	
	rafa	el@myhelpstation.com		完 2	
		to be used for future annual report noti	rication)		
For further information	n concerning this matter, please of	call:		Y OF STATE	
Ra	afael Bohorquez	at (407)	862-0633		
Nam	e of Person	Area Code & Daytin	ne Telephone Number		
Enclosed is a check fo	or the following amount:				
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed	d) Certified	e of Status &	

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

<u> </u>	ly Help Station LLC		•	
(<u>Name of the Limited Lia</u> (A Flo	bility Company as it now apperrida Limited Liability Company	ars on our records.)		
`	, , ,	,		
The Articles of Organization for this Limited Liabi	lity Company were filed on _	Secretary of State	_ and assigned	
Florida document number L0900003345	i7 .			
	·			
This amendment is submitted to amend the following	ng:			
A If an and increase output he way name of the	a limited liability commony b			
A. If amending name, enter the new name of the	e named hability company n	<u>ere</u> :		
	1 22 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	MA.4. 4	Cm	
The new name must be distinguishable and end with th "L.L.C."	ie words "Limited Liability Com	pany," the designation "LL	C" or the abbrevi	iation
Enter new principal offices address, if applicable	e:			_
(Principal office address MUST BE A STREET A	(DDRESS)			
			<u> </u>	
			SEC.	et starting
Enter new mailing address, if applicable:			经	ه ه محسن
(Mailing address MAY BE A POST OFFICE BO	X)		-2 23 23 25 25	1
			m	TAT1
			700	-
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			Om F	
Name of New Registered Agent:			<u></u>	
N D				
New Registered Office Address:	· · · · · · · · · · · · · · · · · · ·	Enter Florida street addre	SS	_
-	Cik	, Florida	Zip Code	
	City		ыр Соае	

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

	· I = Managing Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add Remove
			_
			Add Remove
			Add Remove
			Add Remove
	_		Add S
			ASAdd -2
D. If a		s) here: (Attach additional sheets, if necessary.)	
	Changes in MEMBERS & Membership Remove Catalina Bohorquez as Memb	per & Add Natalia Bohorquez as Member.	-
	Membership Interests: Rafael A. Boho	rquez 90 units. Natalia Bohorquez 10 uni	S
	Percentage Interest: Rafael A. Bohorq	uez 90%. Natalia Bohorquez 10%.	-
Dated _	August 10 , 200	9	-
	Signature of a member of	r authorized representative of a member	
	Raf	ael Bohorquez	
	Typed or	printed name of signee	· · · · · · · · · · · · · · · · · · ·

Page 2 of 2

Filing Fee: \$25.00

MEMBERS

The following persons are the new Members of the Company, and their initial capital contributions based on My Help Station Membership Meeting #2 and ownership is set forth below.

Name	

Rafael Antonio Bohorquez

Natalia Bohorquez

Percentage Interest

90%

10%

Pfaklar V

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SECRETARY OF STATE
AND A SEE FLORIDA

My Help Station LLC

204 W. Sabal Palm Place

Longwood, FL 32779

Membership Meetings

Meeting #2

07/31/09

Catalina Bohorquez and Rafael Bohorquez met as members and owners of the company My Help Station LLC. Each of them had a 50% interest. They met with the purpose to approve some actions to be executed by the company. They agreed on the following:

1. They discussed Natalia Bohorquez's interest in buying 10% of the company. They also discussed Catalina Bohorquez's interest in selling 50% of her membership interest (all she owned). They agreed in accepting Natalia Bohorquez's interest in buying 10% and Rafael Bohorquez will buy 40% additional to what he owns. The new membership interest was establish the following way:

Rafael Bohorquez 90%

Natalia Bohorquez 10%

- Catalina accepted to receive \$500 for the previously mentioned transaction. She received the
 payment in cash. Starting today she does not own any membership interest but she is still
 holding her position of manager/officer.
- 3. We informed Natalia Bohorquez about the decisions taken in Meeting #1 on 4/15/09. She accepted all of the information.
- 4. Iris Bohorquez was removed as an officer. The new officers are: Rafael Bohorquez, Catalina Bohorquez and Natalia Bohorquez.

Rafael A. Bohorquez

Catalina Bohorquez

Natalia Bohorquez Iris Bohorquez

EXHIBIT C

08/10/09

OFFICERS

The following persons are elected as officers of the Company:

Name of OfficerTitleRafael Antonio BohorquezPresidentNatalia BohorquezVice President

Catalina Bohorquez Co-President

SECRETARY OF STATE

EXHIBIT D

08/10/09

NEW MEMBER'S CONSENT

The undersigned agrees to be bound as a Member by the terms of the Operating Agreement of MY HELP STATION LLC as if the undersigned was a signatory thereof.

Signature

Name: Natalia Bohorquez

Date:

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