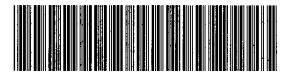
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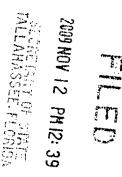
•			
(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			
A. LUNT			
NOV 1 6 2009			
EXAMINER			

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11/12/09--01047--004 **25.00



COVER LETTER

TO: Registration Division of C				
SUBJECT:	NUVE	ERUS, LLC		
Songron,		ed Liability Company		
The enclosed Articles of	of Amendment and fee(s) are sub-	nitted for filing.		
Please return all corres	pondence concerning this matter	to the following:		
	RANDY	M. GOLDBERG, ESQUIRE		
		Name of Person		
	·	Firm/Company		
	2901 SW	149TH AVENUE, SUITE 140		
		Address	786 17AL	
MIRAMAR, FL 33027		AH NO		
	RGOI	City/State and Zip Code RGOLDBERG@AHCS.COM E-mail address: (to be used for future annual report notification)		
For further information	E-mail address: (to concerning this matter, please ca		PRIONOV 12 PH 12: 39	
	-			
	GOLDBERG, ESQUIRE of Person	at (754) 224 Area Code & Daytime Tel	4-0 <u>867</u>	
Enclosed is a check for	_			
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Fec, Certificate of Status & Certified Copy (additional copy is enclosed)	
	LING ADDRESS: stration Section	STREET/COURIER A	ADDRESS:	

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

NUVERUS, LLC	D
(Name of the Limited Liability Company as it no (A Florida Limited Liability Co	w appears on our records.) ompany)
The Articles of Organization for this Limited Liability Company were filed	d onAPRIL 10, 2009 and assigned
Florida document numberL09000035110	
This amendment is submitted to amend the following:	
A. If amending name, <u>enter the new name of the limited liability comp</u>	pany here:
The new name must be distinguishable and end with the words "Limited Liabilit"L.L.C."	ty Company," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	LL CAR
	10 No. 77
	192 N
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	<u> </u>
	<u> </u>
B. If amending the registered agent and/or registered office address here:	ess on our records, enter the name of the nev
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida 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 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					
MGR	GERALD G. GLASS		☐ Add ☑ Remove		
			Add Remove		
			Add Remove		
		Po Tra An An Tr	Add Remove		
		Copie Copie Copie Copie	Remove		
D. If an	nending any other information, enter c		Remove		
		& WELLNESS, LLC, 2901 SW 149TH AVENUE			
	SUITE 140, MIRAMAR, FL 3302	27			
Dated	11/06/09 ,				
	Signature of a m	ember of authorized representative of a member			
	Rai	ndy M. Goldberg, Esquire Typed or printed name of signee			

Page 2 of 2

Filing Fee: \$25.00