L10000082466

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T. HANDTON
AUG 8 0 2010
EXAMINER

COVER LETTER

TO: Registration S Division of Co			
SUBJECT:	The Heart Group	of Broward County, LLC	
		ted Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspondent	ondence concerning this matter	to the following:	
		Paul Rondino	
		Name of Person	
		Firm/Company	
	One We	est Sample Road, Suite 208	
		Address	
	Dec	erfield Beach, FL 33064	
		City/State and Zip Code	
	E-mail address: (ondino@comcast.net to be used for future annual report notifica	ation)
For further information of	concerning this matter, please of	•	,
	aul Rondino	# \	05-9353
Name (or rerson	Area Code & Daytime	elephone Number
Enclosed is a check for t	he following amount:		
\$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	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

The Heart Gr	oup of Broward Count	ty, LLC	
(Name of the Limited Liab (A Flori	ility Company as it now appear da Limited Liability Company)	s on our records.)	
The Articles of Organization for this Limited Liabilit Florida document numberL10000082466	ry Company were filed on	8/6/2010	SHARETAR BIVISION OF C
This amendment is submitted to amend the following			LEU Y OF STA DORPORA
A. If amending name, enter the new name of the	· · · · · · · · · · · · · · · · · · ·	_	OITA JIE
	rt Group of Broward, LLC		NS.
The new name must be distinguishable and end with the "L.L.C."	words "Limited Liability Compar	ny," the designation "	LLC" or the abbreviation
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET AL	DDRESS)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	2		
B. If amending the registered agent and/or re registered agent and/or the new registered office a		ur records, <u>enter</u>	the name of the new
Name of New Registered Agent:			
New Registered Office Address:			
	Ent	ter Florida street add	dress
		, 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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager

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August 24 , 2010 .			- 2
Me /hul -	August 24 , 201	0	.
Signature of a member or authorized representative of a member			
Dated			g any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Page 2 of 2

Filing Fee: \$25.00