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B. BOSTICK
JUN 1 0 2011
EXAMINER

COVER LETTER

Division of C	orporations			
SUBJECT:	Hadron	Partners, LLC		
	Name of Lim	ited Liability Company		
The enclosed Articles of	of Amendment and fee(s) are su	bmitted for filing.		
Please return all corresp	pondence concerning this matte	r to the following:		
		Jack Lander		
	Name of Person			
	Hadron Partners, LLC			
	Firm/Company			
	27 Laurel Oaks Cirlce			
		Address		
	Mary Control of the C	Tequesta/FL 33469		
		City/State and Zip Code		, W
	E-mail address: (jcl@hadronlife.com to be used for future annual report notific	ation)	
For further information concerning this matter, please call:			TALLA	
	Jack Lander	ai(329-9331 <u></u>	S Table
Name	of Person	Area Code & Daytime	Telephone Number (17)	Constant Constant
Enclosed is a check for	the following amount:		FLORID	
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing I Certificate of Certified Cop (additional co	f Status &

MAILING ADDRESS:

TO:

Registration Section

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

tners, LLC		
ny as it now appears on our records.) Liability Company)		
were filed on March 14, 2011 and assigned		
ility company here:		
ted Liability Company," the designation "LLC" or the abbreviation		
, , , ,		
27 Laurel Oaks Circle		
Tequesta, Florida 33469		
4521 PGA BOULEMED		
SULTE 240		
4521 PLA BONGEMED SULTE 240 PALM BEACH GARDENS, FL 33418		
fice address on our records, enter the name of the new		
e:		
COTTO CAMPANIAN CONTRACTOR CONTRA		
Enter Florida street address		
, , , , , , , , , , , , , , , , , , ,		
City Florida Ziv 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 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

MGRM = Managing Member **Type of Action** <u>Title</u> Name 1 **Address** ☐ Add Remove Remove ☐ Add Remove ∏ Add Remove ∏Add Remove \prod Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary) May 27 2011 Dated __ Signature of a member or authorized representative of a member Jack C. Lander Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00