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MAR 29 2011
EXAMINER

# **COVER LETTER**

TO: Registration Division o	on Section f Corporations		
SUBJECT:	SPINE ENTHUSIAS	ST, LLC	
	Name of Limited Liability Co		<del></del>
Dear Sir or Madam	:		
The enclosed Articl	es of Correction and fee(s) are submitted for filing		
Please return all con	respondence concerning this matter to the following	ng:	
	Clayton Hummel		
	Name of Person	_	
S	PINE ENTHUSIAST, LLC		
	Firm/Company	_	
	2044144		4
	3814 W Leona Street Address	<del>-</del>	
	Aumess	1	
	Tampa FL, 33629	) (	MAR 28 PM
	City/State and Zip Code	רה ה	~ <b>CS</b>
ماء		<u>. 1</u>	Yer State
E-mail addres	ummel@rachismedical.com s: (to be used for future annual report notification)	- 9	TAT
	•	<u> </u>	·
For further information	tion concerning this matter, please call:		
Cl	ayton Hummel at ( 813	784.7775	
		ode & Daytime Telephone Number	<del></del>
STREET/COURIE Registration Section	ı	MAILING ADDRESS: Registration Section	
Division of Corpora Clifton Building	tions	Division of Corporations P.O. Box 6327	
2661 Executive Cer	iter Circle	Tallahassee, Florida 32314	
Tallahassee, Florida	32301	,	
Enclosed is a check	for the following amount:		
\$25 Filing Fee	\$30 Filing Fee & S55 Filing Fee & Certificate of Status Certified Copy	\$60 Filing Fee, Certificate of Status & Certified Copy	
CR2E062 (08/05)			

# ARTICLES OF CORRECTION FOR FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

Pursuant to section 608.4115, F.S., this document is being submitted <u>within the required 30</u> <u>business days</u> to correct the <u>attached</u> articles of organization or application to transact business in Florida.

FIRST:	The name of the limited liability company is: SPINE ENTHUSIAST, LLC				
<u>SECON</u>	<u>D</u> : The articles of organization or the application to transact business				
(CHI	CK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMEN	T			
ن ن	Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows:  Incorrect - Article V - MGRM - Clayton Hummel				
<u>(</u>	Correct - Article V - MGRM - Happy Guys Medical, Inc. (an 5 Corp	<u></u>			
3	814 W LEONA STREET, TAMPA FL 33629				
-	<u>PR</u>				
	/as defectively signed. The manner in which the document was defectively signed a	ınd			
t	ne appropriate correction are as follows:				
_					
_	LAR.				
	ARY SSEE				
- Dated:	March 23 2011	ED			
Daicu	Claude the men				
	Signature of a member or authorized representative of a member				
	Clayton Hummel				
	Typed or printed name of signee				
	Filing Fee: \$25.00 Certified Copy: \$30.00 (optional)				

# Electronic Articles of Organization For Florida Limited Liability Company

L11000033712 FILED 8:00 AM March 21, 2011 Sec. Of State ncausseaux

#### Article I

The name of the Limited Liability Company is: SPINE ENTHUSIAST, LLC

#### Article II

The street address of the principal office of the Limited Liability Company is:

3814 W LEONA STREET TAMPA, FL. US 33629

The mailing address of the Limited Liability Company is:

3814 W LEONA STREET TAMPA, FL. US 33629

#### Article III

The purpose for which this Limited Liability Company is organized is: SPINAL INDUSTRY

#### **Article IV**

The name and Florida street address of the registered agent is:

CLAYTON HUMMEL 3814 W LEONA STREET TAMPA, FL. 33629

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Registered Agent Signature: CLAYTON HUMMEL

## Article V

The name and address of managing members/managers are:

Title: MGRM CLAYTON HUMMEL 3814 W LEONA STREET TAMPA, FL. 33629 US L11000033712 FILED 8:00 AM March 21, 2011 Sec. Of State ncausseaux

## **Article VI**

The effective date for this Limited Liability Company shall be: 04/01/2011

Signature of member or an authorized representative of a member

Electronic Signature: CLAYTON HUMMEL

I am the member or authorized representative submitting these Articles of Organization and affirm that the facts stated herein are true. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of the LLC and every year thereafter to maintain "active" status.