

LD90000014201

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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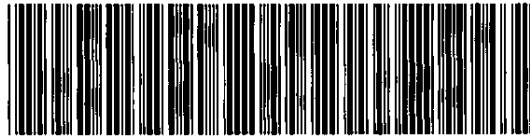
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MAY 12 2009

EXAMINER

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05/11/09--01052--016 **30.00

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09 MAY 11 PM 2:28
SECRETARY OF STATE
TALLAHASSEE FLORIDA

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: PRIVILEGE USA, LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

PATRICK BENSOUSSAN
Name of Person

PRIVILEGE USA, LLC
Firm/Company

15801 BISCAYNE BOULEVARD - SUITE 201
Address

NORTH MIAMI BEACH, FL 33160
City/State and Zip Code

PESBENS@AOL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

PATRICK BENSOUSSAN at (305) 904 2220
Name of Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|---|--|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input checked="" type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,
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**

PRIVILEGE USA, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 02/11/2009 and assigned
Florida document number L09000014201.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

N/A

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

15801 BISCAYNE BOULEVARD - SUITE 201

NORTH MIAMI BEACH, FL 33160

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

15801 BISCAYNE BOULEVARD - SUITE 201

NORTH MIAMI BEACH, FL 33160

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 address here:

Name of New Registered Agent:

Patrick Bensoussan

New Registered Office Address:

15801 BISCAYNE BOULEVARD - SUITE 201

Enter Florida street address

NORTH MIAMI BEACH, Florida

City

33160

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

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09 MAY 11 PM 2:11
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TALLAHASSEE, FLORIDA

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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	YONI M. DAHAN	201 N. DIXIE HIGHWAY HALLANDALE FL 33009 US	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	PATRICK BENSOUSSAN	15801 BISCAYNE BOULEVARD SUITE 201 NORTH MIAMI BEACH FL 33160	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

D.B.A : PRIVILEGE MERCHANT ALLIANCE

Dated May 5th, 2009

Signature of a member or authorized representative of a member

YONI M. DAHAN

Typed or printed name of signee

SECRETARY OF STATE
TALLAHASSEE FLORIDA

09 MAY 11 PM 2:28

FILED