

W3000018011

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

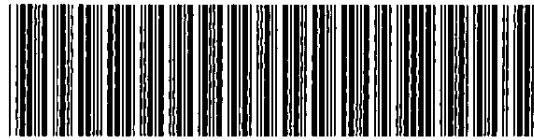
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



200129914002

05/30/08--01036--009 \*\*25.00

2008 MAY 30 AM 10:52  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

T. CLINE  
JUN - 2 2008  
EXAMINER

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** Premier Transportation Services 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:

Morris D. Burgess  
(Name of Person)

Premier Transportation Services  
(Firm/Company)

2704 W Oakland Park Blvd  
(Address)

Oakland Park FL 33311  
(City/State and Zip Code)

For further information concerning this matter, please call:

Morris D. Burgess at (561) 644-6786  
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- \$25.00 Filing Fee
- \$30.00 Filing Fee & Certificate of Status
- \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)
- \$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

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
2008 MAY 30 AM 10:52

FILED

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

PREMIER TRANSPORTATION SUS. 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 5/19/2003 and assigned Florida document number L03000018011

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)

2704 W. Oakland Park Blvd  
Oakland Park FL 33311

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

Same as Above

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:

MORRIS D. BURGESS

New Registered Office Address:

2704 W. Oakland Park Blvd

(Enter Florida street address)

Oakland Park, Florida 33311

(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.

Morris D. Burgess

(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

| <u>Title</u> | <u>Name</u>         | <u>Address</u>                                   | <u>Type of Action</u>  |
|--------------|---------------------|--|--|
| MGRM         | Norris D. Burgess   | 312 E. Clinton Ave<br>Roosevelt NY 11575         | <input checked="" type="checkbox"/> Add<br><input type="checkbox"/> Remove |
| MGRM         | Myrione Pierrelouis | 1040 D Summit Place Cir<br>W Palm Beach FL 33415 | <input type="checkbox"/> Add<br><input checked="" type="checkbox"/> Remove |
|              |                     |  | <input type="checkbox"/> Add<br><input type="checkbox"/> Remove            |
|              |                     |  | <input type="checkbox"/> Add<br><input type="checkbox"/> Remove            |
|              |                     |  | <input type="checkbox"/> Add<br><input type="checkbox"/> Remove            |
|              |                     |  | <input type="checkbox"/> Add<br><input type="checkbox"/> Remove            |

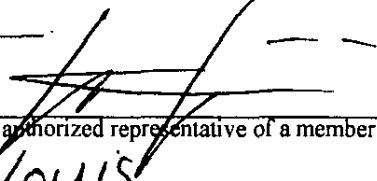
D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Add  
 Remove  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
MAY 30 AM 10:52

FILED

Dated \_\_\_\_\_

  
\_\_\_\_\_  
Signature of a member or authorized representative of a member  
MYRIDNE PIERRE LOUIS  
\_\_\_\_\_  
Typed or printed name of signee