## L05000108598

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(Address)					
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SECRETARY OF STATE DIVISION OF CORPORATION

## **COVER LETTER**

TO:	Registration Sec Division of Corp				
SUBJECT: Premier Investing, LLC					
		Name of Limi	ted Liability Company		
The end	closed Articles of A	mendment and fee(s) are sub	omitted for filing.		
Please	return all correspon	dence concerning this matter	to the following:		
Audley Humes					<del></del>
	_				
Firm/Company					
451 Monument Rd. #110					
Address					<del></del>
Jacksonville, Fl. 32225					
City/State and Zip Code					
	<u></u>				
For furt	her information cor	ncerning this matter, please o	to be used for future annual repo all:	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	Aud	ley Humes	at (_407_)	454-1644  Daytime Telephone No	
	Name of l	Person	Area Code &	Daytime Telephone No	umber
Enclose	ed 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 er	Cert nclosed) Cer	0 Filing Fee, tificate of Status & tified Copy ditional 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



Premier	Investing, LLC	· (	
( <u>Name of the Limited Liability C</u> (A Florida Lia	Company as it now appear nited Liability Company)	s on our records.)	
The Articles of Organization for this Limited Liability Cor Florida document numberL05000108598	mpany were filed on	11/09/2005	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limite	ed liability company here	<b>2:</b>	
The new name must be distinguishable and end with the words "L.L.C."	"Limited Liability Compar	ny," the designation "I	LC" or the abbreviation
Enter new principal offices address, if applicable:	451 Monumer	nt Rd. #110	
(Principal office address MUST BE A STREET ADDRE	Jacksonville,	FL 32225	
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)	<del> </del>		<del></del>
B. If amending the registered agent and/or register registered agent and/or the new registered office addre		ur records, <u>enter t</u>	he name of the new
Name of New Registered Agent:		<del></del>	
New Registered Office Address:	Fnt	er Florida street add	ress
	City	, Florida	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 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 **Type of Action Title** <u>Name</u> <u>Address</u> MGRM Michael Savino 3786 PEPPERVINE Dr. ☐ Add **✓** Remove Orlando, Fl. 32828 ☐ Add Remove Remove Remove ∏Add Remove Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) March 7 2011 . Signature of a member or authorized representative of a member Audley Humes Typed or printed name of signee

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Filing Fee: \$25.00