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COVER LETTER

Division o	of Corporations		
SUBJECT: Sol	utions 1 Insurance C	onsultants, LLC.	
	(Name of L	imited Liability Company)	
The enclosed Artic	les of Amendment and fee(s) are su	bmitted for filing.	
Please return all co	orrespondence concerning this matte	er to the following:	
	Timothy R. Jones		-, · · · · · · · · · · ·
	•	(Name of Person)	
			07 M
		(Firm/Company)	RET AHA
	2733 Bancroft Blv	/d.	MAR -1 PH 12: 4 CRETARY OF STAT LAHASSE FLORI
		(Address)	
	Orlando Florida,	30833	O7 MAR -1 PH 12: 41 SECRETARY OF STATE ALLIAHASSES SLORID
		/State and Zip Code)	510 -
For further informa	ation concerning this matter, please	call:	
Timot	thy R. Jones	at (407) 568	-3762
	(Name of Person)	(Area Code & Daytim	
Enclosed is a check f	or the following amount:		
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	MAILING ADDRESS:	_ STREET/COURI	

Registration Section
Division of Corporations
P.O. Box 6327

Tallahassee, FL 32314

Registration Section

TO:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Solutions 1 Insurance Consultants, LLC.

	(A Florida Limited Liability Company)		
FIRST:	The Articles of Organization were filed on August 11, 2006 and assigned document number L06000079400 and assigned		
SECOND:	This amendment is submitted to amend the following:		
	Name of Company has changed to:		
	Premier Quality Insurance, LLC.	SECRETA FALLIAHA	07 HAR -
		SEE SEE	
		STATE	14:21HP
		•	
			_
Dated Fe	bruary 22 <u>, 2007</u> .	-	-
,	Rignature of a member or authorized representative of a member		
	Timothy R. Jones		
	Typed or printed name of signee		