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K.SALY EXAMINER DEC 31 2012

COVER LETTER

TO: Registration Section Division of Corporation	ons			,	
SUBJECT: PLES		COPERTY de Liability Company	CLEA	-NING	660
		,			
The enclosed Articles of Amend	ment and fee(s) are sub-	nitted for filing.			
Please return all correspondence	concerning this matter t	o the following:			
	JASON	Shinhals Name of Person	TER		
. L	RESTIGE	PROPERTY (Film/Company	LEANIN	V6	
	16 PINE	RDG TR. Address			
	IESTIN, F	City/State and Zip Code			
L	NESTIGE PR E-mail address: (to	OPERTY CCE be used for future annual rep	ANING ort notification)	@YAHOO	.Com
For further information concerni					
JASON Shinho Name of Person	ISTER	at (321) 8 (23-962 Daytime Telepho	ne Number	
Enclosed is a check for the follo	wing amount:				
□ \$25.00 Filing Fee □\$3	30.00 Filing Fee & Certificate of Status	□\$55.00 Filing Fee & Certified Copy (additional copy is e		\$60,00 Filing Fee, Certificate of Statu Certified Copy (additional copy is	

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

A TOTAL C		NIEG A GUANA		Em
ARTIC	CLES OF ORGA	NIZATION		12 OFC TED
	OF		بر پذر	35 PM
PRESTIBE (Name of the Limited I	PROPERTY Jability Company as it	CLEA now appears on		12 DEC 26 PM 5: 57
(A F	lorida Limited Liability	Company)	9/11	101 17/13/40
The Articles of Organization for this Limited Lia	bility Company were f	iled on 872	3/12	and assigned
Florida document number <u>LOGOGO</u>	88593	,		
This amendment is submitted to amend the follow	wing:			
A. If amending name, enter the new name of t	the limited liability co	mpany here:		
The new name must be distinguishable and end with L.L.C."	the words "Limited Lial	bility Company,"	the designation "	LLC" or the abbreviation
Enter new principal offices address, if applical	ble:			
Principal office address MUST BE A STREET				
Trincipal office dancess most DL A STABLE	<u> </u>			
Enter new mailing address, if applicable:				
<u>Mailing address MAY BE A POST OFFICE B</u>	<u></u>			
·			L-120	
			_	
B. If amending the registered agent and/or registered agent and/or the new registered officered.	•	ldress on our	records, <u>enter</u>	the name of the new
egistered agent and/or the new registered on	ce agui ess nere.			
Name of New Registered Agent:	JASON	Shinho	STER	
	46 PIN		+0	
New Registered Office Address:	76_IIN		`lorida street adı	dress
	DESTIN		, Florida	22641
	City		, г югіая	Zip Code
New Registered Agent's Signature, if changing Re	egistered Agent:			-
A A STATE OF THE PARTY OF THE P				

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

If amendisig 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 **Address Type of Action Title** Name Remove Remove Remove Remove Remove Remove

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		<u></u>		
	 			
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12/18	, <i>Q</i>	(0/2		
1	Signature of a me	moet or authorized	representative of a membe	r

Page 3 of 3

Filing Fee: \$25.00