L08000047685

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SECRETARY OF STATE ALLAHASSEE, FLORIDA

COVER LETTER

TO.

*Registration Section

Tallahassee, FL 32314

Division of Cor	rporations				
SUBJECT: Prestig	e Two. LLC				0
SUBJECT. 1.100.19		ited Liability Company)			•
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return all correspond	ondence concerning this matter	to the following:			
			•		
	Sophia Duarte		<u> </u>		
	•	(Name of Person)			
	Prestige Luxury Auto Re	ntals, Inc			
		(Firm/Company)		•	
·	10875 NW 7th St Apt 12			FS 2	
		(Address)		2009 AUG -4 P 3: 09 SECRETARY OF STATE ALLAHASSEE.FLORIDA	
	Miami, Florida 33172			UG -L	
		(City/State and Zip Code)		SEE. O F	9777
				FES TO	-
For further information of	concerning this matter, please c	all:			•
Sophia Duarte		at (516) 650-1278		P Q	
(Name	of Person)	(Area Code & Daytime Telephone Number)			
Enclosed is a check for t	the following amount:				
☑ \$25.00 Filing Fee	□\$30.00 Filing Fee & Certificate of Status	□\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certifie	ate of Status &	osed)
Regist	JNG ADDRESS:	STREET/COURIER Registration Section			
	on of Corporations 3ox 6327	Division of Corporation Building	ons		

2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Prestige Two, LLC	·			
(Name of the Limited Liability Comp	any as it now appears on our rec Liability Company)	ords.)		
(A Piotida Limited	Liability Company)			
The Articles of Organization for this Limited Liability Compar	ny were filed on <u>5/12/2008</u>	and assigned		
Florida document number L08000047685				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited lia	bility company here:			
The new name must be distinguishable and end with the words "Lin"L.L.C."	nited Liability Company," the desi	gnation "LLC" or the abbreviation		
E.E.C.		TAL		
Enter new principal offices address, if applicable:				
(Principal office address MUST BE A STREET ADDRESS)				
	**	SA I		

		Fig. 7		
Enter new mailing address, if applicable:		2 W U		
(Mailing address MAY BE A POST OFFICE BOX)				
B. If amending the registered agent and/or registered		s, enter the name of the new		
registered agent and/or the new registered office address he	<u>ere</u> :			
Name of New Registered Agent:				
Mary Barrierand Office Address.	·			
New Registered Office Address:	New Registered Office Address: (Enter Florida street address)			
	·	•		
	, FI (City)	lo rida (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)

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>	Address	Type of Action
MGRM	Prestige Luxury Auto Rental, log	10875 NW 7th St Apt 12 Miami, Florida 33172	Add Add Remove
MGRM	PLR Network, LLC	10875 NW 7th St Apt 12 Miami, Florida 33172	_□□ Add _□□ Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
D. If amendin	ng any other information, enter chang		TO I
			3 09
Dated July 29			
	Signature of a member	DVA C. d or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00