## 608000085865

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## **COVER LETTER**

TO:	Registration Se Division of Con	ection rporations			
SURB	ECT:	Р	RN, LLC		
SUBJ			ited Liability Company		
The en	closed Articles of	Amendment and fee(s) are sul	omitted for filing.		
Please	return all correspo	ondence concerning this matter	to the following:		
			Gloria J. Kreutz  Name of Person		
			Traine of a cloud		
	Firm/Company			-	
	4001 Caparosa Circle  Address				
			Melbourne, FL 32940		_
		re E-mail address: (	City/State and Zip Code  ddoors99@gmail.com to be used for future annual repo	ort notification)	
For fur	ther information of	concerning this matter, please of		,	
		oria J. Kreutz of Person	at ( <u>321</u> ) Area Code &	242-4912  Daytime Telephone Number	er
Enclose	ed is a check for t	he following amount:			
\$25	5.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is en	nclosed) Certifie	ate of Status &
	Regista Divisio P.O. B	ING ADDRESS: ration Section on of Corporations ox 6327 assee, FL 32314	Registration Division of Clifton Buil	Corporations	2011 JAN 21 SECRETARY FALLAHASSE

Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	PRN, LLC			
(Name of the Limite	ed Liability Company as it now appea (A Florida Limited Liability Company)	rs on our records.)	<del></del>	•
	, , ,			
The Articles of Organization for this Limited	Liability Company were filed on	09/09/2008	and assig	gned
Florida document number L0800008	35865			
This amendment is submitted to amend the fo	llowing:			
A. If amending name, enter the new name	of the limited liability company he	<u>re:</u>		
The new name must be distinguishable and end w	vith the words "I imited I jability Comp	any " the designation "I"	I C" or the ak	hreviation
L.L.C."	vin the words Emined Elabinty Comp	any, the designation is	LC of the ac	ore viation
Enter new principal offices address, if appl	icable:			
Principal office address MUST BE A STRE	ET ADDRESS)			
Enter new mailing address, if applicable:				
Mailing address MAY BE A POST OFFICE				
Training warress HITT DE TIT OUT OF THE				
	W-14.			
B. If amending the registered agent and	l/or registered office address on	our records, enter-th	ie name of	the new
registered agent and/or the new registered		1	SEC.	
				4.1
Name of New Registered Agent:	Gloria J. Kreutz	(A)		Transmuse Monachine
		ن. نيا.	pe 44 <sub>6</sub>	Darflest.
New Registered Office Address:		ter Florida street addr	TATE THE	Private
	EI			: . ·
		, Florida 🚟		
	City		7in 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

	the Managers or Managing Memb g Member being added or removed	pers on our records, enter the title, name, and from our records:	address of each Manager
MGR = Mai MGRM = M	nager Ianaging Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	Charles R. Harvin III	4001 Caparosa Circle Melbourne, FL 32940	Add Remove
<u>MGRM</u>	Gloria J. Kreutz	4001 Caparosa Circle Melbourne, FL 32940	✓ Add Remove
	<del></del>		Add Remove
<del></del>			Add Remove
			Add Remove
			Add Remove
D. If amend	ling any other information, enter ch	nange(s) here: (Attach additional sheets, if neces.	sary.)
	Jan 18,2011,		201 JAN 21 AN DO 41
7	Jan 18,2011 Glaria Signature of a me	Heretze Morized representative of a member	<u>च</u>
	Gloria	J. Kreutz (surviving spouse)  yped or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00