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(Requestor's Name)  (Address)  (Address)  (City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)	
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(Business Entity Name)	
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JUN: - 2 2009

**EXAMINER** 

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SECRETARY OF STATE TALLAHASSEE FLORIDA

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Ronald P. Glantz

Also Admitted in DC & NY Bars

Wendy Newman Glantz Florida Board Certified Marital & Family Law



7951 Southwest Sixth Street Suite 200 Plantation, FL 33324 Tel: 954.424,1200

E-mail: glantz@glantzlaw.com Website www.glantzlaw.com

May 28, 2009

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

RE: PRESTIGE SETTLEMENT, LLC

Our Matter No.: 17238

To Whom It May Concern:

Enclosed please find a check in the amount of \$25.00, representing the fee for the Amendment to Articles of Organization for the above-referenced LLC. Also, enclosed are the completed Cover Letter and Articles of Amendment to Articles of Organization of Prestige Settlement, LLC.

Please make the necessary change and provide our office with proof once it has been completed.

If you have any questions, please do not hesitate to call me at (954) 424-1200, extension 375 or my assistant Joy at extension 284.

Very truly yours,

LAW OFFICES OF GEANTZ & GLANTZ, P.A.

By:

MICHÄEĽ G. STERN, ESQUIRE

MGS/jdm Enclosure

## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: Prestige Settlement LLC.  Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Michael Stevn Esquilar Name of Person()
Glantz-Glantzeff.
7951 SW 6M Street
Plantation, Florida 33324 City/State and Zip Code
E-mail address: (to be)used for furture annual report notification)
For further information concerning this matter, please call:
Michael Hem, ESG. at (954) 424-1200 ext. 375  Name of Person at (954) 424-1200 ext. 375  Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\ \tag{S55.00 Filing Fee \} \tag{S60.00 Filing Fee,} \tag{Certificate of Status} \tag{Certified Copy} \tag{Certified Copy} \tag{Certified Copy} \tag{Certified Copy} \tag{Certified Copy} \tag{Certified Copy} \tag{Additional 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

Prestrae Settlemen	rt, LC
(Name of the Limited Liability Com (A Florida Limited	pany as it now appears on our records.) d Liability Company)
The Articles of Organization for this Limited Liability Compared Florida document number	- habe
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited li	ability company here:
alla	
The new name must be distinguishable and end with the words "Li"L.L.C."	mited Liability Company," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	WA
(Principal office address MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)	N/A.
B. If amending the registered agent and/or registered registered agent and/or the new registered office address he	office address on our records, enter the name of the new
Name of New Registered Agent:  New Registered Office Address:	TALL SEC
New Registered Office Address.	Enter Florida street address
	, Florida
N 5 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	City Zip Cone
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent and ag the provisions of all statutes relative to the proper and com	RID RID

If Changing Registered Agent, Signature of New Registered Agent

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 <u>Title</u> Name **Address** Type of Action Remove ☐ Add Remove ☐ Add Remove Add Remove ∏Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Signature of a member or authorized representative of a member Typed or printed name of signee

Page 2 of 2
Filing Fee: \$25.00