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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

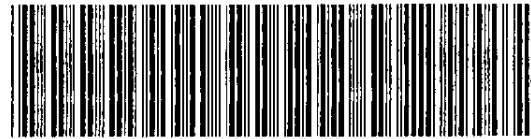
(Business Entity Name)

(Document Number)

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B. KOHR

MAR - 8 2011

EXAMINER

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
11 MAR - 4 PM 1:22

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Premium Vehicle Service Plans, LLC  
Name of Limited Liability Company

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
11 MAR -4 PM 1:22

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Fred Dorushkin

Name of Person

Premium Vehicle Service Plans, LLC

Firm/Company

7900 West Glades Road Suite 505

Address

Boca Raton, FL 33434

City/State and Zip Code

fred@ghsdebtsolutions.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Fred Dorushkin

Name of Person

at ( 561 )

443-4499

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &  
Certificate of Status

☐ \$55.00 Filing Fee &  
Certified Copy  
(additional copy is enclosed)

☒ \$60.00 Filing Fee,  
Certificate of Status &  
Certified Copy  
(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**

**Premium Vehicle Service Plans, LLC**

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
11 MAR -4 PM 1:22

The Articles of Organization for this Limited Liability Company were filed on 9/14/2011 and assigned  
Florida document number L10000096256.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

**Enter new principal offices address, if applicable:**

**(Principal office address MUST BE A STREET ADDRESS)**

7900 West Glades Road

Suite 505

Boca Raton, Fl 33434

**Enter new mailing address, if applicable:**

**(Mailing address MAY BE A POST OFFICE BOX)**

7900 West Glades Road

Suite 505

Boca Raton, Fl 33434

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent:

New Registered Office Address:

*Enter Florida street address*

City, **Florida**

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

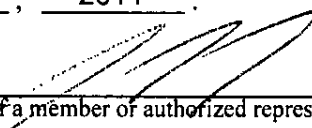
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
Mr	Peter Seldin	4496 SW 34th Terrace Dania Beach, FL 33312	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
Mr	Bruno Schuschny	1000 SW 13th Ave Boca Raton, FL 33486	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
Mr	Chris Reimer	1201 SE 2nd Court #308 Fort Lauderdale, FL 33301	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
Mr	Fred Dorushkin	5324 North Boca Marina Boca Raton, FL 33487	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
Mr	Greg Filippo	3289 St. Annes Drive Boca Raton, FL 33486	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Dated March 3, 2011

  
\_\_\_\_\_  
Signature of a member or authorized representative of a member

Greg Filippo

\_\_\_\_\_  
Typed or printed name of signee