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T. CLINE
JUN 1 5 2011
EXAMINER

COVER LETTER

Division of Corporations
SUBJECT: LTD Frestments 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:
Frank Cavallino Name of Person
LTD Investments, LLC. Firm Company
6651 Audubon Trace W. Address
West Palm Beach, FL. 33412 City State and Zip Code France Prestige holdings group com France Prestige holdings group com France Prestige holdings group com France Prestige holdings group application
For further information concerning this matter, please call: For further information concerning this matter, please call:
For further information concerning this matter, please call:
For further information concerning this matter, please call: Frank Cavallino at (361) 314-9002 FOR STAR STAR
Enclosed is a check for the following amount:
\$30.00 Filing Fee & S55.00 Filing Fee & S60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) \$60.00 Filing Fee, 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 Tallahassec, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

LTD Friestments, (Name of the Limited Liability Company as)	LLC		
(<u>Name of the Limited Liability Company as</u> (A Florida Limited Liabilit	t now appears on our records.) y Company)		
The Articles of Organization for this Limited Liability Company were filed on 4/22/11 and assigned			
Florida document number <u>L11000048266</u> .			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liability c	ompany here:		
The new name must be distinguishable and end with the words "Limited Lie"L.L.C."	ability Company," the designation "LLC" or the abbreviation		
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)	SE ALL		
	P		
	ASS		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)	70 3 C		
	DT 70		
B. If amending the registered agent and/or registered office a registered agent and/or the new registered office address here:	ddress on our records, enter the name of the new		
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street address		
	, Florida		
City	v 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 Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member <u>Address</u> Type of Action <u>Title</u> <u>Name</u> MGRM MGRH ☐ Add Remove Remove Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) MAY Signature of a member or authorized representative of a member TRANK CAVALINA
Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00