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B. BOSTICK

OCT 1 6 2012

EXAMINER

COVER LETTER

TO:	Registration S Division of Co					
SUBJI	· ECT:	PRD PA	ARTNERS, LLC			
5,50			ted Liability Company	-		
The en	closed Articles of	f Amendment and fee(s) are sul	omitted for filing.			
Please	return all corresp	ondence concerning this matter	to the following:			
6.	DULBIS PEREDA					
			Name of Person			
		P	RD PARTNERS, LLC			
	Firm/Company					
	3410 EMERALD POINTE DRIVE #203A		- IALL	12		
Address		A	0CT	end ar		
HOLLYWOOD, FL 33021		(\$\frac{4}{3}\)	2	Santan San Santan Santan Santan		
	City/State and Zip Code			P	S. martin F # P Facilizati	
		E-mail address: (bnacan@yahoo.com to be used for future annual report notification)	- E.S.	PH I2: 5	A.merika
For fu	rther information	concerning this matter, please of	• ,	ÂDA A	2	
	DUI	LBIS PEREDA	at (786) 970-3916			
	Name	of Person	Area Code & Daytime Telephone Num	ber		
Enclos	sed is a check for	the following amount:				
\$25	5.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	Certified Copy Certific (additional copy is enclosed) Certific	Filing Fee icate of Sta ied Copy ional copy	atus &	
MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		tration Section on of Corporations 30x 6327	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

PRD PARTI				
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our re Liability Company)	<u>coras.</u>)		
The Articles of Organization for this Limited Liability Company Florida document number	were filed on01/23/	2 OCT IS		
A. If amending name, enter the new name of the limited liab	ility company here:	PHIZ: 51		
The new name must be distinguishable and end with the words "Limit".L.C."	ited Liability Company," the des	signation "LEC" or the abbreviation		
Enter new principal offices address, if applicable:	3410 EMERALD POINTE DRIVE			
(Principal office address MUST BE A STREET ADDRESS)	<u> </u>			
	HOLLYWOOD, FL 330	021		
Enter new mailing address, if applicable:	3410 EMERALD POIN	ITE DRIVE		
(Mailing address MAY BE A POST OFFICE BOX)	#203A			
	HOLLYWOOD, FL 330	021		
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her Name of New Registered Agent: New Registered Office Address:		s, enter the name of the nev		
	Enter Florida street address			
		lorida		
	City	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 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	RAFAEL O PEREDA III	1865 SOUTH OCEAN DRIVE #6B HALLANDALE BEACH, FL33009	Add ✓ Remove
	**************************************		Add Remove
			Add Remove
			Add Remove
			Add Remove
			AddRemove
D. If amend	ding any other information, enter chan	ge(s) here: (Attach additional sheets, if necessar	y.)
	•		D was a
Dated	OCTOBER 9 2		5 PH 2:51
	, CDI	A.W. er or authorized representative of a member ULBIS C PEREDA ed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00