L12000148779

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EXAMINER

COVER LETTER

TO:

Registration Section
Division of Corporations

SUBJECT: Premier Transportation Leasing FL, 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:

Elizabeth A. Strole

Name of Person

Rome Clifford Katz & Koerner, LLP

Firm/Company

214 Main Street

Address

Hartford CT 06106

City/State and Zip Code

estrole@rckklaw.com

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

For further information concerning this matter, please call:

Elizabeth A. Strole

860 527-7044

Name of Person

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

APPROVED

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Premier Transportation Leasing FL, LL		
(Name of the Limited Liability Comp (A Florida Limited	pany as it now appears on our records.) I Liability Company)	
The Articles of Organization for this Limited Liability Comparing Florida document number <u>L12000148779</u> .		2 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited li	ability company here:	
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:	324 Coconut Isle Drive	
(Principal office address MUST BE A STREET ADDRESS)	Fort Lauderdale, FL 33301	12 SE
		En B
Enter new mailing address, if applicable:	324 Coconut Isle Drive	FILEI 20 P ASSEEL
(Mailing address MAY BE A POST OFFICE BOX)	Fort Lauderdale, FL 33301	5 7 7 7
		55
		3.4
B. If amending the registered agent and/or registered registered agent and/or the new registered office address h		the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street ad	dress
	, Florida	
	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 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 = Ma MGRM = M	nager Ianaging Member		
<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
			Add
			Remove
			Add
			Remove
			Add Remove
			12 DEC 20 SECREADED TALL, HASSE
			SS Remove 12: 56
			Add
			Remove
			Add
			Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
The Limited Liability Company is managed by a Managing Member
Dated December 18 2012
Dated
Signature of a member or authorized representative of a member
Elizabeth A. Strole
Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00