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July 25, 2014

WILLIAM BUCKMASTER 2 PINE CONE DR #352754 PALM COAST, FL 32135

SUBJECT: PREMIER MARKETING LLC

Ref. Number: L13000008008

We have received your document for PREMIER MARKETING LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Justin M Shivers
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 914A00016001

COVER LETTER

TO: Registration Section Division of Corpor			
SUBJECT: One S	ource Properties LLC		•
	Name of Limi	ited Liability Company	
The enclosed Articles of Am	endment and fee(s) are sub-	mitted for filing.	
Please return all corresponde	nce concerning this matter	to the following:	
	Willian	n Buckmaster	
	1 1111111111111111111111111111111111111	Name of Person	
	One S	ource Properties LLC	
		Firm/Company	
	2 Pine	Cone Dr. #352754	
		Address	
	Palm (Coast FL, 32135	
	h ad . aa	City/State and Zip Code	
_		naster.william@gmail.com to be used for future annual report notifi	cation)
For further information conc	erning this matter, please ca	all:	
William Buckmaste	er	_{at (} 386 ₎ 232-8861	
Name of Pe	rson		Telephone Number
Enclosed is a check for the fo	ollowing 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

One Source Proper				
(<u>Name of the Limited L</u> (A F	iability Company as it now appears on our records.) lorida Limited Liability Company)			
The Articles of Organization for this Limited Liabil	ity Company were filed on01/15/2013	an	d assign	ned
Florida document numberL100008008	.			
This amendment is submitted to amend the following	ng:			
A. If amending name, enter the new name of the	e limited liability company here:			
Premier Source Marketing LLC				
The new name must be distinguishable and end with the word	ls "Limited Liability Company," the designation "LLC" or the	abbreviat	ion "L.L	.C."
Enter new principal offices address, if applicable	21			
• •				
(<u>Principal office address MUST BE A STREET A</u>	<u>DDRESS)</u>			
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE BO)	X)			
B. If amending the registered agent and/or	registered office address on our records, ente	r thể na	me of	the ne
registered agent and/or the new registered office			<u> </u>	uic iic
		`-'	7.25	
			ত্র	•
Name of New Registered Agent:		147		*****
New Registered Office Address:		21,445		- €mi
	Enter Florida street address	• ';		- i i
	ann -		اسا يخر	, mad
_	, Florida,	. Zip (- T	
	City		ARCC.	

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 605, 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 Authorized Member on our records, <u>enter the title, name, and address of each Manager or Authorized Member being added or removed from our records</u>:

MGR = M $AMBR = A$	lanager .uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add
			□ Remove
			Add
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	r than the date of filing: pecific, cannot be prior to date of receipt or filed date a led by the Florida Department of State)	(optional) nd cannot be more than 90 days after
ate this document is fil		(optional) nd cannot be more than 90 days after
		(optional) nd cannot be more than 90 days after

Page 3 of 3

Filing Fee: \$25.00