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To:

Division of Corporations

Fax Number : (850)617-6383

From:

⊴Email Address:__

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 : (307)200-2803 Phone Fax Number : (855)330-1010

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN PREMIER CLUB MANAGEMENT, L.L.C.

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Help

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PREMIER CLUB MANAGEMENT, L.L.C.

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

(2) Florida Ellip	ned Emerity Stangardy	
The Articles of Organization for this Limited Liability Comp	any were filed on 03/14/2008	and assigned
Florida document number L08000026871		
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 contain the words "Limited I	Liability Company," the designation "LLC" or the a	bbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS	5)	2
		SE SE
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
		•
B. If amending the registered agent and/or registered off	ice address on our records, enter the nar	ne 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	
	, Florida	
	•	Zip Code
New Registered Agent's Signature, if changing Registered Ag	ent:	
I hereby accept the appointment as registered agent and provisions of all statutes relative to the proper and comp accept the obligations of my position as registered agent being filed to merely reflect a change in the registered of company has been notified in writing of this change.	lete performance of my duties, and I am as provided for in Chapter 605, F.S. Or	familiar with and ; if this document is

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR_	Angelo Rosati	Via delle Roselle nr. 15	XiAdd
		00042 Anzio (RM) Rome, Italy	□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
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			□Remove
			□Change
	<u> </u>		□Add
			□Remove
			□ Change

	(Attach additional sheets, if necessary.)
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	PH
	= 10
Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be prior to Note: If the date inserted in this block does not meet the applicab document's effective date on the Department of State's records.	(optional) date of filing or more than 90 days after filing.) Pursuant to 605.0 ole statutory filing requirements, this date will not be listed
the record specifies a delayed effective date, but not an effective time cord is filed.	e, at 12:01 a.m. on the earlier of: (b) The 90th day after
Dated 09/14 2021	<u>.</u> .
Riley fark Signature of a member or authori	zed representative of a member
Riley Park	
Typed or printed	name of signee

Filing Fee: \$25.00