L10000061070

(Requestor's Name)			
(Address)			
(Address)			
(Cit. (Ch. t. 17)) (Dh. a.a. 49)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
(Docament variable)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			

Office Use Only



100188418401

12/07/10--01024--014 **25.00

OIVISION OF SOM IS 48

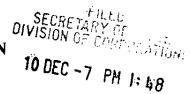
N. Cuiligen DEC - 8 2015

COVER LETTER

TO: Registration Division of C		•	•	
SUBJECT:	Prestige Realty &	Management Group,	LLC	
	Name of Lim	ited Liability Company		
The enclosed Articles of	of Amendment and fee(s) are su	bmitted for filing.		
Please return all corres	pondence concerning this matte	r to the following:		
		Luis Iglesias		
		Name of Person		
	Prestige Re	ealty & Management Grou	p, LLC	
		Firm/Company	 	
	136	1365 N.W. 98th Court Unit 3		
		Address		
		Doral/FL 33172		
		City/State and Zip Code		
	G. mail addresse	luis@pr-mg.com to be used for future annual report no	tilization)	
Exp Coult to the Council to		•	ancanon)	
For further information	concerning this matter, please	call:		
	Luis Iglesias	at (786)	395-0341	
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 enclos	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
MAII	LING ADDRESS:	STREET/COU	RIER ADDRESS:	

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



Prestige Realty (Name of the Limited Liabil (A Florid	y & Management Gro lity Company as it now appear ia Limited Liability Company)	oup, LLC rs on our records.)
The Articles of Organization for this Limited Liability Florida document number		06/07/2010 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the li	imited liability company her	<u>e</u> :
The new name must be distinguishable and end with the v "L.L.C."	words "Limited Liability Compa	ny," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET AD)	DRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
		
B. If amending the registered agent and/or reg registered agent and/or the new registered office ad	istered office address on o ldress here:	our records, <u>enter the name of the new</u>
Name of New Registered Agent:		
New Registered Office Address:		
	Ent	er Florida street address
	0:	, Florida
	City	7in 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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager

MGRM = Managing Member

<u>Title</u> <u>Name</u> <u>Address</u> **Type of Action** MGR Luis Iglesias 1365 N.W. 98th Court Unit 3 ✓ Add Doral, FL 33172 Remove MGR Niurka Munoz 1365 N.W. 98th Court Unit 3 Remove Doral, FL 33172 ☐ Add Remove Add Remove ∏Add Remove \square Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) December 6th 2010 Dated Signature of a member or authorized representative of a member Niurka Munoz Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00