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JUN 25 2020

COVER LETTER

Division of Co	orporations		
	Vorldwide Holdings, LLC		
	Name of Lim	ited Liability Company	
The enclosed Articles of	of Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	oondence concerning this matter	to the following:	
	Anthony J. Vecchiarelli		
		Name of Person	
	Prestige Worldwide Holdin	ngs, LLC	
		Firm/Company	
	2519 McMullen Booth Road S	uite 510 #206,	
		Address	
	Clearwater, FL 33761		
		City/State and Zip Code	
	ajvecchi@gmail.com E-mail address: (to be used for future annual report notifi	ication)
For further information	concerning this matter, please ca		·
Anthony J. Vecchiarell	i	727 644-4770 at ()	
Name	of Person	Area Code Daytime	Telephone Number
Enclosed is a check for	the following amount:		
□ \$25.00 Filing Fcc	☐ \$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 tadditional copy is enclosed)

TO:

Registration Section

Mailing Address:
Registration Section
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address: Registration Section **Division of Corporations** The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

2020 JUN 11 PM 5: 27

(Name of the Limited Liability Compa (A Florida Limited	any as it now appears on our records.) Liability Company)		
The Articles of Organization for this Limited Liability Company Florida document number $\frac{\text{L}13000002085}{\text{L}13000002085}$			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	oility company here:		
N/A			
The new name must be distinguishable and contain the words "Limited Liabi	ility Company," the designation "LLC" or the abbreviation "L.L.C."		
Enter new principal offices address, if applicable:	2519 McMullen Booth Road		
(Principal office address MUST BE A STREET ADDRESS)	Suite 510 #206		
	Clearwater, FL 33761		
Enter new mailing address, if applicable:	2519 McMullen Booth Road		
(Mailing address MAY BE A POST OFFICE BOX)	Suite 510 #206		
	Clearwater, FL 33761		
B. If amending the registered agent and/or registered office agent and/or the new registered office address here: Name of New Registered Agent: Matthew J. Lyo			
Hame of New Registered Figure.	- D. J. D. J. C. J. 510 5204		
2010 14 14 15	n Booth Road. Suite 510 #206		
New Registered Office Address: 2519 McMulle	Enter Florida street address		
New Registered Office Address: 2519 McMulle Clearwater	Enter Florida street address , Florida 33761		

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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 Degistered 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 2929 JULY 11 PH 5: 27	Type of Action
AMBR	Jeffrey R. Thibault		□ Add
			□Remove
		22493 Cherokee Rose PI, Land O Lakes, FL 34639	🖹 Change
			□Add
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n effective date is list te: If the date inse		c and cannot be prior to da not meet the applicable	ite of filing or more than	(optional) 190 days after filing.) Pursi rements, this date will r	
ecord specifies a de is filed.	layed effective date, but	t not an effective time,	at 12:01 a.m. on the	earlier of: (b) The 90th	n day after the
icd June	8th	2020	_ /		
		Il st	9/		
	Signature	of a member or authorized	Trepresentation of a mi	mber	