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TO:

Registration Section
Division of Corporations

Division of Corporations

P.O. Box 6327 Tallahassee, FL 32314

SUBJECT: Prestige Elite Group, 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:
Carry Pomple Name of Person
Prestige Elite Group, LLC
Firm/Company
1274 NE 150 St.
Address
Miami, FL 33161
Prestige elitegroup a gmail. Com E-mail address: (to be used for future annual report notification)
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Garry Pomple at (561) 223-5407 Name of Person Area Code Daytime Telephone Number
Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \(\begin{array}{cccccccccccccccccccccccccccccccccccc
(additional copy is enclosed) Certified Copy (additional copy is enclosed)
MAILING ADDRESS: STREET/COURIER ADDRESS:
Pagistration Section Pegistration Section

Division of Corporations Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

Prestige Elite	Group, LLC
(Name of the Limited Liability Compan (A Florida Limited Li	y as it now appears on our records.) ability Company)
The Articles of Organization for this Limited Liability Company v Florida document number LISOO0180167	A1 00 0015
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabil	ity company here:
The new name must be distinguishable and contain the words *Limited Liabilit	ry Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
	3885 Sanford Ave SW # 3544 Grandville, MI 49418 Tice address on our records, enter the name of the new
registered agent and/or the new registered office address here	
Name of New Registered Agent:	7
New Registered Office Address:	Enter Florida street address
	City , Florida Zip Code TT'a
New Registered Agent's Signature, if changing Registered Agent:	En C
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete paccept the obligations of my position as registered agent as publing filed to merely reflect a change in the registered office of company has been notified in writing of this change.	performance of my duties, and I am familia with and rovided for in Chapter 605, F.S. Or, 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 = M $AMBR = A$	anager uthorized Member	· ·	
<u>Title</u>	Name	Address	Type of Action
MGR	Garry Pompee	2885 Sanford Ave SW	
	, ,	35441	Remove
		Grandville, MI 49418	Change
CFO	Fabianne Pompee	12 NE 150 St.	Add
	•	Miani, FL 33/6/	Remove
			Change
MGR	Herold Pomper	1274 NE 150 St	Add
	•	Miani, FL 33/61	IV Remove
	·		Change
			Remove
			Change Ch
			SSEE. FLARIDA Add
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Effectiv	e date, if other than the date of filing: (optional)	29
(If an effect Note: I	te date, if other than the date of filing:	5.022 (3)(1 ted as the
docume	nt's effective date on the Department of State's records.	میسی ک
the recr	লৈ specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earli	ී ආ ierof
) The s	90th day after the record is filed.	
Dated_	Oct. 27 2015	
Dailed _	2- 17	
	Signature of member or authorized representative of a member	
	Gary Pampee	

Page 3 of 3

Filing Fee: \$25.00