## 116000205838

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## \* COVER LETTER

\*TO: Registration Section

INHS18 (2/14)

Division of Corporations							
SUBJECT: PRESTIGE HOLDINGS USA LLC	PRESTIGE HOLDINGS USA LLC						
	Name of Limited Liability Company						
Dear Sir or Madam:							
The enclosed Registered Agent/Registered Office Chan	ige and fee(s) are submitted for filing.						
Please return all correspondence concerning this matter	to the following:						
U (AA) TO) (T							
IVAN TOVT							
Name of Person							
Firm/Company							
1144 Ë. 19TH ST							
Address							
JACKSONVILLE, FL 32206							
City/State and Zip Code							
ivantovt@aol.com							
E-mail address: (to be used for future annual repo	rt notification)						
For further information concerning this matter, please of	all:						
IVAN TOVT at (	17 945-9818						
Name of Person	Area Code & Daytime Telephone Number						
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee; Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314						
Enclosed is a check for the following amount:							
	☐ \$55 Filing Fee & Certified Copy						

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1.	Na	une of the limited liability company: PRESTIGE H					
2	(a)	C/O IVAN TOVT	ſ	(b) C/O IVAN TOVT			
	(4)	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	_ `		Mailing address of limited liab (Note: MAY BE POST OF		
		136 OVERLOOK ROAD		36 OVE	RLOOK ROAD		
		HASTINGS-ON HUDSON, NY 10706		HASTIN	GS-ON HUDSON, I	NY 1070	)6
		11-08-2016		L1600020	05838		
<ul><li>3.</li><li>5.</li></ul>	(a)	Date of filing/registration in Florida URS AGENTS, LLC	4.		Document number		
3.	(a)	Registered Agent and Registered Office shown on the records of the 3458 LAKESHORE DR	he Floric	la Dept. of State	<b>-</b> 2:		
		Registered Office Address (MUST BE FLORIDA STREET A	-				
		TALLAHASSEE, , FL_	32312	2	-	17	ilos Sees
	(b)	IVAN TOVT				MAR	
	(-)	Enter name of NEW Registered Agent and/or NEW Registered	Office a	ddress:	-	9-	
		1144 E. 19TH ST				PM 2:	SPOS SPOS
		NEW Registered Office Address:			-	: 29	
		JACKSONVILLE, , FL_	32206	3	-		
th ag wa	e cha ent v as/we	imited liability company is not organized under the law inge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lia ere authorized by an affirmative vote of the members of cles of organization or the operating agreement of the l	the reg ability of the lin limited	istered office company, it is nited liability	e and the business office is hereby confirmed that to y company or as otherwi	of the reg the chang	gistered e(s)
_	Signa	ture of a member or authorized representative of a member			Printed or typed name of sig	nee	
I pr th to no	here ovisi e obl mere otified	by accept the appointment as registered agent and agre ons of all statutes relative to the proper and complete igations of my position as registered agent as provided ely reflect a change in the registered office address, I h d in writing of this change	ee to ac perforn I for in iereby c	et in this cape nance of my o Chapter 605 confirm that	acity. I further agree to duties, and I am familiar 5, F.S. Or, if this docume the limited liability comp	comply w with and ent is bein pany has	ith the accept g filed been
Si	ignatu	re of Registered Agent					