46000217818

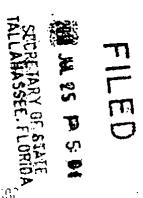
(Re	equestor's Name)	
(Ac	ddress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nar	me)
(Do	ocument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



400331911034

07/25/19--01026--017 **25.00



COVER LETTER

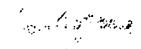
Division of Corporations	
SUBJECT: Prestige Motor Gizzoup Lic	
Division of Corporations UBJECT: Prostize Meter Group Litt Name of Limited Liability Company The enclosed Articles of Amendment and fee(s) are submitted for filing. I he enclosed Articles of Amendment and fee(s) are submitted for filing. I he enclosed Articles of Amendment and fee(s) are submitted for filing. I have of Person Prostize Mole Group Litt Firm/Company 1078 Shallet Dr. U. t. C. Address Ornage C. L. F. 32763 City/State and Zip Code Prestige M Group & GMAIL. Com E-mail address: (to be used for further annual report notification) or further information concerning this matter, please call: Christopher Valentin Name of Person Area Code Daytine Telephone Number	
The enclosed Articles of Amendment and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Christopher Valentin	
Same of reison	
Prestige Motor Georp Wi	<u></u>
Firm/Company	
1078 Shadick Dr Unit C	
Address	
Ornnye City FL 32763	
enjibule and say eval	
Prestigen Groupe GMAIL. com E-mail address: (or be used for tutire annual report notifical	tion)
	•••
To further information concerning this matter, preuse can.	
Christopher Valentin a1 (540) 607-8200	<u> </u>
Name of Person Area Code Daytime Te	elephone Number
Enclosed is a check for the following amount:	
\$25.00 Filing Fee \$\Bigsup \$30.00 Filing Fee & \$\Bigsup \$55.00 Filing Fee &	
Certificate of Status Certified Copy	Certified Copy

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



$\rho_{\rm act}$	M. L. Carrelle FILED
(Name of the Limited Lia (A Flo	ibility Company as it now appears on our records.) orida Limited Liability Company)
	ticles of Organization for this Limited Liability Company were filed on Italian OF 54A and assigned document number L16000217818 mendment is submitted to amend the following: mending name, enter the new name of the limited liability company here: mame must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." mew principal offices address, if applicable: inal office address MUST BE A STREET ADDRESS) mew mailing address, if applicable: me address MAY BE A POST OFFICE BOX) amending the registered agent and/or registered office address on our records, enter the name of the new red agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: 1078 Shadel D. Unit C Enter Florida street address
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 Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET AL	ODRESS)
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX	
Name of New Registered Agent:	Christopher Valentin
New Registered Office Address:	1078 Shadick Dr Unit C
	d the following: v name of the limited liability Company here: ontain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." if applicable: 4 STREET ADDRESS) cable: OFFICE BOX) gent and/or registered office address on our records, enter the name of the new istered office address here: C hristopher Valentia

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 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 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	LUIS R SANTIAGO	14106 Plantation Lakes Cim	
		SANFORD, FL 3:2771	 Remove
			Change
			□ Add
			□ Remove
			Change
			Remove
			Change
	- 		Add
			Remove
			Change
			Remove
			Change
			□ Remove
			Change

_		
_		
_		
_		
_		
_		
_		
-		
_		
_		
_		
_		
-		
(an eff Note:	ive date, if other than the date of filing:	.0207 ed as
	ford specifies a delayed effective date, but not an effective time, at $12:01$ a.m. on the earlied 90 th day after the record is filed.	er ol
)ated	<u>6/30</u> . 2019	
rucu		
JuleU	Signature of a member or authorized representative of a member	

Page 3 of 3

Filing Fee: \$25.00