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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Première Business Solutions Group, LCC 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:
Damion Campbell Name of Person
Premiere Business Group, LLC Firm/Company
1643 Musgrass Circle
Melbourne, FC 32904
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Damion Campbell at (954) 8/2-5319 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 \$\Bigcup \\$30.00 Filing Fee & Certificate of Status \$\Bigcup \\$55.00 Filing Fee & Certified Copy (additional copy is enclosed) \$\Bigcup \\$60.00 Filing Fee, Certified Copy (additional copy is enclosed)

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

Premiere Business Solutions Group, LLC
(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

	T. 10 a
	Company were filed on <u>June 15, 2017</u> and assigned
Florida document number <u>L 17000 130 78</u>	<u>'3</u> .
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the lin	
The new name must be distinguishable and contain the words "Li	mited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
<u>-</u>	
Enter new principal offices address, if applicable:	
<u>(Principal office address MUST BE A STREET ADD</u>	PRESS)
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or reging registered agent and/or the new registered office ad	istered office address on our records, <u>enter the name of the new</u>
registered agent and/or the new registered office ad-	uress nere.
Name of New Projectored Accept	
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	, Florida
New Registered Agent's Signature, if changing Register	City , Florida Zip Code
I hereby accept the appointment as registered agen	City , Florida Zip Code
I hereby accept the appointment as registered agen provisions of all statutes relative to the proper and accept the obligations of my position as registered o	City Florida City Ted Agent: t and agree to act in this capacity. I further agree to comply with the complete performance of my duties, and I am familiar with and agent as provided for in Chapter 605, F.S. Or, if this document is
I hereby accept the appointment as registered agenorovisions of all statutes relative to the proper and accept the obligations of my position as registered abeing filed to merely reflect a change in the register	City Florida City Ted Agent: t and agree to act in this capacity. I further agree to comply with the complete performance of my duties, and I am familiar with and agent as provided for in Chapter 605, F.S. Or, if this document is red office address, I hereby confirm that the limited liability
I hereby accept the appointment as registered agen provisions of all statutes relative to the proper and accept the obligations of my position as registered o	City Florida City Ted Agent: t and agree to act in this capacity. I further agree to comply with the complete performance of my duties, and I am familiar with and agent as provided for in Chapter 605, F.S. Or, if this document is red office address, I hereby confirm that the limited liability

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>	<u>Name</u>	Address	Type of Action
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			Remove
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Filing Fee: \$25.00