118000 263245

(Re	questor's Name)	
(, 10	questor e riamo,	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
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(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
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COVER LETTER

- Division of Cor				
SUBJECT: Prem	il Group 1 Name of Lim	Actos LLC		
	Name of Lim	ited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for fili n g.		
Please return all correspo	ndence concerning this matter	to the following:		
	James 2	Name offerson		
	Premier G	CUD AUCOS (
	1500 (ar	clover par 1	+206	
	Fort Land	erdale, FL 3.	3316	
	James @ Ov	to be used for future annual report not	com.	2010
		L	ification) 5-	(A) (A)
For further information co	oncerning this matter, please co	ill:		
lames B	ΙωινουΛ	at (954) 232	766)	P -6
Name of	Person	Area Code Daytin	ne Telephone Number	
Enclosed is a check for th	e following amount:		;•	. 3
\$25,00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Stat Certified Copy (additional copy is en	
	ING ADDRESS:	STREET/COUR		
Registration Section Division of Corporations		Registration Section Properties of Corpo		
P.O. Bo Tallaha	ox 6327 ssee, FL 32314	G lifton Building 26 61 Executive C Tallahassee, FL 3		

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

gremier urcup muto	5 LLC			
(Name of the Limited Liability Comps (A Florida Limited	my as it now appears on our records.) Liability Company)			
The Articles of Organization for this Limited Liability Company Florida document number <u>L 18000 263 245</u> .	1 1	and assig	gned	
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liab	lity company here:			
The new name must be distinguishable and contain the words "Limited Liabi	ity Company," the designation "LLC" or the abh	reviation "L.L	C."	
Enter new principal offices address, if applicable:				
(Principal office address MUST BE A STREET ADDRESS)		==		_
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)				-
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here		he name o	<u>f the</u>	new
Name of New Registered Agent:		2613	96:0	
		: 3	1	CEST C
New Registered Office Address:	Enter Florida street address		- ₹7	+ + 177
	, Florida	·n'' :	iř —	
New Registered Agent's Signature, if changing Registered Agent:	City	Zip Code	: . သ	\$
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as plain a filed to merely reflect a change in the registered office	performance of my duties, and I am fa rovided for in Chapter 605, F.S. Or, i	miliar with f this docun	i and nent i	

If Changing Registered Agent, Signature of New Registered Agent

company has been notified in writing of this change.

	Authorized Person(s) authorized to man- com our records:	age, enter the title, name, and address of each i	person being added
MGR = Ma AMBR = Au	nager thorized Member		
<u>Title</u>	Name	Address	Type of Action
MG2	James Bluckburn	1500 (ardona Road, #2	
		Fort Landerdale, FL 33316	🗆 Remove
			D Change
<u>MG-Q</u>	Macric (rew Worldwick	1500 Cordova Rd, #706	
		Fort Landerdale, Fl 3231	Remove
			Change
			🗆 Add
			□ Remove
			Change
			Add 2
			Remove
			Change :
			Ξ.Add ω
			Remove
			Change
			Add
			_□ Remove
			_ Change
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D. If an	nending any other information, enter change(s) here: (A	ttach additional sheets, if necessary.)	
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		<u> </u>	. 31
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(It an e <u>Note</u>	tive date, if other than the date of filing: ffective date is listed, the date must be specific and cannot be prior to date If the date inserted in this block does not meet the applicables ment's effective date on the Department of State's records.	(optional) c of filing or more than 90 days after filing.) Pursuant to 60statutory filing requirements, this date will not be list	5.0207 (3 (b) led as the
(f the re (b) Th	ecord specifies a delayed effective date, but not an e 90th day after the record is filed.	effective time, at 12:01 a.m. on the earli	er of:
Date	1 29th December 2018	L_	
	Signature of a member or authorized	representative of a member	
	James Buckeyn Typed or printed name	e of signee	
	Page 3 of	3	
	Filing Fee: \$	2 5.00	