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OCT 17 2020

COVER LETTER

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Tallahassee, FL 32314

TO: Registration Section Division of Corporations		
SUBJECT: Premier Die Inwestment Realty LUC 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:		
Ornar Telfer SR. Name of Person		
Premier ON e Investment Realty (CC)		
3900 N. Housstull Rd. Apr. 22/322		
West Parkin Brach Fl 33422 City/State and Zip Code		
Premier on e FruistmentRealty @ amail. com E-mail address: (to be used for future annual report hotification)		
For further information concerning this matter, please call:		
Name of Person at 23 Area Code Daytime Telephone Number		
Enclosed is a check for the following amount:		
□ \$25.00 Filing Fee □ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)		
Mailing Address:Street Address:Registration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of Tallahassee		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

TO ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Come (A Florida Limited	any as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Compan Florida document number <u>L2000339704</u> .	v were filed on 817 2020 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited lia	bility company here:
The new name must be distinguishable and contain the words "Limited Liab	oility Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	3900 N. Hallerhill Rd
(Principal office address MUST BE A STREET ADDRESS)	Sciete 22 1322 West PAIN Beach F133422
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	3900 N. Hauerfill Rd. Suite 221322 Ulest Palm Beach F133PZ
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, enter the name of the new registered
Name of New Registered Agent:	ar Tefer Sc
New Registered Office Address: 3900	5 N. Hawar half Rel Sinte 22/322 Enter Florida street address

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 Type of Action Title Name 3900 N. Houstill Rd (2) Seite 221372 De PALM Omor Teifor JR. 3900 N. Howarkill Rd. 19210
Siete 22/322 Beach Fl Remove ____ □ Add □Remove _____ □Remove _____ □ Change ______ □Change _____ Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
I am Changing the Company address
and Also the mailine address for
5900 N. Hauerhell Rd Suite
221322 West PAIM Beach
FI 33422 And Remove the
Current address on Recordi
<u></u>
E. Effective date, if other than the date of filing:
If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.
Dated August 29 . 2020. Signature of a member of authorized representative of a member
Typed or printed name of signee