L21000423468

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2021 OCT 25 AM O.

COVER LETTER

	tration Section ion of Corporat	ions	•	
SGRIFCT:	Presti	Nationalde Name of Limit	LLC	
~ · · · · ·		Name of Limit	ed Liability Company	
The enclosed A	Artic les of Amen	dment and fee(s) are subn	nitted for filing.	
Please return a	Il correspondenc	te concerning this matter to	o the following:	
		ALAN	Name of Person	
	_		Firm/Company	
	_	3962 Cocople	Address	
	_	Coconut C	City/State and Zip Code with 1100 amail. 100 obe used for luture angual report notice	3
	7	erestigenation E-mail address: (1)	wide I co amail con o be used for future angular report notifi	cation)
For further inf	ormation concer	ning this matter, please ca		•
	Name of Pers	on .	at (803) 412 - Area Code Daytime	6425 Telephone Number
Enclosed is a	check for the fol	lowing amount:		
≯ \$25.00 Fi	ling fee 🗆 🗆	S30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
<u>Mail</u> 5	ling Address:		Street Address: Degistration See	ction

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Prestige Nationwick LCC	re an aug racarde \		
(Name of the Lirnited Liability Company as it now appear (A Fiorida Limited Liability Company)	s on our records.		
The Articles of Organization for this Limited Liability Company were filed on Florida document number <u>とと1000423468</u> .	09/23/21	and ass	signed
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liability company he	er <u>e</u> :		
The new name must be distinguishable and contain the words "Limited Liability Company," the o	lesignation "LLC" or the abbre	viation "L	.L.C."
Enter new principal offices address, if applicable:	<u> </u>	202	
(Principal office address MUST BE A STREET ADDRESS)			
	<u>i-a.</u>	0CT ;	11
	Hara	25	1
Enter new mailing address, if applicable:	<u> </u>		
(Mailing address MAY BE A POST OFFICE BOX)	<u>υν</u> 1145	ـــ۾ـــ	
	177	_2_	
B. If amending the registered agent and/or registered office address on our	records, enter the name of	of the no	ew register
agent and/or the new registered office address here:			
		,	
Name of New Registered Agent:			 .
New Registered Office Address:			
Enter F1.	orida street address		
	Florida		

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.

City

If Changing Registered Agent, Signature of New Registered Agent

Zip Code

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>	Name	Address	Type of Action
MGR	Carlyn Peart	5760 Lakecich Dr Apt 505	DAdd
		Margate, FL 33063	& emove
			□Change
MGR	Alexia Gallardo	3962 Cocoplan Cir & Unit	4 stodd
		Colonel Crech, Fl 3366	Remove
			□Change
			□Add
			□Remove
			□Change
			DAdd
			□Remove
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			□Remove
			□Change

	ling any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	<u> </u>
	·
	
	
f an effecti <u>Note:</u> If t	date, if other than the date of filing: (optional) we date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.020 the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a it's effective date on the Department of State's records.
e record s rd is filed.	pecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated	Signature of member or authorized representative of a member
	Signature of member or authorized representative of a member
	ALAN SARUES Typed or printed name of signer

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