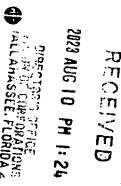
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COVER LETTER

TO:

Registration Section

Divi	sion of Corp	orations			
	PRESTIGIO	US PROPERTY MANAGEM	MENT SERVICES, LLC		
SUBJECT:		Name of Limi	ited Liability Company		
The enclosed	Articles of A	amendment and fee(s) are sub-	mitted for filing.		
Please return	all correspon	dence concerning this matter	to the following:		
		ANGELA P. DEAN			
			Name of Person		
		PRESTIGIOUS PROPERT	Y MANAGEMENT SERVICE	S. LLC	
Firm'Company					
		PO BOX 14280			
Address					
		DELRAY BEACH, FL 33-	182		
			City/State and Zip Code		
		prestigiouspms@gmail.com			
		E-mail address: (t	to be used for future annual report n	otification)	
For further in	iformation co	neerning this matter, please co	ill:		
ANGELA DEAN		561 504-9649 at ()			
Name of Person			Area Code Days	time Telephone Number	
Enclosed is a	check for the	e following amount:		,	
			7 011 00 EW E 4	200000000000000000000000000000000000000	
□ \$25.00 F	iling Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy radditional copy is enclosed)	∑ S60.00 Filing Fee, Certificate of Status & Certified Copy fadditional copy is enclosed)	
			//		
Reg Div P.C	ling Address gistration S vision of Co). Box 6327 lahassee, F	ection orporations 7	Street Address: Registration : Division of C The Centre o (2415 N. Mon Tallahassee,	f Tallahassee roe Street, Suite 810 \	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

FILED

PRESTIGIOUS PROPERTY MANAGEMENT SERVICES, LLC

2023 AUG 10 PM 1: 38 (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on $^{\rm JUNE~10,~2022}$ Florida document number ______L22000267064 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 ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address _, Florida ___ City New Registered Agent's Signature, if changing Registered Agent:

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

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the

company has been notified in writing of this change.

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

Title 100	Name	Address	Type of Action
Title AR ICP	CRYSTAR DORCH	323 N.E. 6TH AVENUE	
		DELRAY BEACH, FL 33483	■Remove
			□Change
			□Add
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		, 	
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an effecti	ve date is listed, t the date inserted	than the date of the date must be spe I in this block do e on the Departm	eific and cannot les not meet the	applicable sta-	f filing or more t actory filing re	(option of the control of the contro	o nal) filing.) Porsuant t s date will not b	o 605,0207 (, e listed as th
		ed effective date,	but not an effe	ctive time, at 1	2:01 a.m. on t	he earlier of: (b) The 90th day	after the
ocument	pecifies a delay							
ocument record sp I is filed.	JGUST 9		. 2023					
ocument record sp I is filed.		gela f	2023 Dear	·				_

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Filing Fee: \$25.00