122000286076

(Requestor's Name)
(Address)
(Address)
· ,
(City/State/Zip/Phone #)
(OR) State Zipi: Holle #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
J. HORNE
OCT 2 5 2023

Office Use Only



100417444171

10/16/23--01023--005 **25.00



COVER LETTER

TO:	Registration Section Division of Corporations						
SUBJE	PRESTIGE IMPORTS OUTPARCEL 2, LLC						
SODOL	Name	Name of Limited Liability Company					
Dear Si	r or Madam:						
The end	closed Registered Agent/Registered Office	Change and fee(s) are submitted for filing.					
Please r	return all correspondence concerning this r	natter to the following:					
Valerie	Kaye						
	Name of Person						
Prestige	e Motor Car Imports, LLC						
-	Firm/Company						
14800 E	Biscayne Blvd						
	Address						
North M	Miami Beach, Fl. 33181						
	City/State and Zip Code						
	@prestigeimports.com	· · · · · · · · · · · · · · · · · · ·					
E	-mail address: (to be used for future annua	l report notification)					
For furt	ther information concerning this matter, pl	ease call:					
Valerie	Kaye	305 947-1000 at ()					
	Name of Person	Area Code & Daytime Telephone Number					
	Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street. Suite 810 Tallahassee. FL 32303					
	Enclosed is a check for the following an	nount:					
	■ \$25 Filing Fee & Certified Copy						

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

(a)		((b)	
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	15090 Biscayne Blvd		14800 1	Biscayne Blvd
	N. Miami Beach, FL 33181 06/23/2022		N. Miami Beach, FL 33181 L22000286076	
	Date of filing/registration in Florida	4.		Document number
(a)				
	Registered Agent and Registered Office shown on the records of	the Flori	da Dept. of S	State:
	Legacy Wealth Advisors, LLC			<u> </u>
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS) 801 Brickell Avenue Suite # 2550			23 OCT 16 MM D: 03
	Miami, FI	33131	· -	C7 ,
	, , ,			
(b)	Enter name of NEW Registered Agent and/or NEW Registered			
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registere</u>	d Office a	ddress:	9.0
	Kluger, Kaplan, Silverman, Katzen & Levine, P.L.			
	NEW Registered Office Address:		_	
	201 S. Biscayne Boulevard #2700			
	Miami	33131		
inge nt v s/we	imited liability company is not organized under the last or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited light authorized by an affirmative vote of the members lotes of organization of the operating agreement of the	registe ability of of the li limited	red office company, mited liab	and the business office of the registered it is hereby confirmed that the change(s) ality company or as otherwise provided in

Signature of Registered Agent