## L23000372177

(Requestor's Name)	_
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MA	MAIL tus
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer.	
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SECRETARY OF STATE

## COVER LETTER 🐭

TO:

Registration Section

Tallahassee, FL 32314

Division of Cor	porations				
SUBJECT: PREMIER	ENTERTAINMENT GROUP	. LLC			
		ited Liability Company	<del></del>		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return all correspo	ondence concerning this matter	to the following:			
	ARIE A TAYKAN, CPA				
		Name of Person			
	ARIE A TAYKAN & CO	MPANY, CPA			
		Firm Company			
210 N UNIVERSITY DRIVE, SUITE 200					
		Address			
CORAL SPRINGS, FL 33071				2023 SEC TA	
		City/State and Zip Code		SEP SEP	<b>P</b> Ç10
	JULIEM@TAYKANCPA.  E-mail address: (	COM to be used for future annual report notificati	ion)		# 4. * **
For further information e	oncerning this matter, please c	•		2023 SEP 11 PM 3: 45 SECRETARY OF STATE TALLAHAS SEE	710
JULIE MORIN		at ( 954 ) 722-9250	·	題等	É
Name o	f Person	at (954 ) 722-9250 Area Code Daytime Tel	lephone Number	का ज	
Enclosed is a check for the	ne following amount:				
■ \$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Certificate o Certified Cop (additional cop)	f Status & py	
<u>Mailing Addres</u> Registration S	Section	Street Address: Registration Section			
Division of C P.O. Box 632		Division of Corpor The Centre of Talla			

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PREMIER ENTERTAINMENT C	ROUP, LLC	
(Name of the Limi	ted Liability Company as it now appear (A Florida Limited Liability Company)	ers on our records.)
The Articles of Organization for this Limited L Florida document number <u>L23000372177</u>	iability Company were filed on A	UGUST 8, 2023 and assigned
This amendment is submitted to amend the following	owing:	
A. If amending name, enter the new name of	of the limited liability company b	ere:
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 appli-	cable:	
(Principal office address MUST BE A STREE	ET ADDRESS)	PECREE A
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE	<u>BOX)</u>	77 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5
B. If amending the registered agent and/or agent and/or the new registered office addre		records, <u>enter the name of the new registered</u>
Name of New Registered Agent:	MITCHELL KLEIN	· · · · · · · · · · · · · · · · · · ·
New Registered Office Address:	7902 WILES ROAD, STE 136	
	Enter Flo	orida street address
	CORAL SPRINGS	. Florida 33067
	City	Zıp Code

## 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—heing added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	MITCHELL KLEIN	4800 NW 95 DRIVE	☐Add
		CORAL SPRINGS, FL 33076	□ Remove
		<del> </del>	■ Change
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ctive date, if other than the effective date is listed, the date must	date of filing:	he prior to data of fil	ing or more than Ut) a	_ (optional) lass after filing ) Pursa	ant to table
If the date inserted in this bloom	ock does not meet the	e applicable statuto	ry filing requireme	ents, this date will no	nt be liste
ment's effective date on the De	partment of State's	records.			
ord specifies a delayed effective	date, but not an eff	ective time, at 12:0	l a.m. on the earli	er of: (b) The 90th	day after
filed.					
d AUGUST 25	202	3			
	15	$\geq$			
	Signature of a member			<del></del>	

Filing Fee: \$25.00