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COVER LETTER

Division of Corporations
SUBJECT: Prestige Capital Legal Funding LLC 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:
Angel Rodriguez Name of Person
Prestige Capital Legal Funding LLC Firm/Company
1421 Sw 107 Ave, Suite 229
City/State and Zip Code Funding O prostige capital funding Cam E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Angel Podriquez at $(\frac{11}{100})$ Area Code Daytime Telephone Number $\frac{1}{100}$
Enclosed is a check for the following amount:
☐ \$25.00 Filing Fee ☐ \$30.00 Filing Fee & ☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee & ☐

Registration Section

TO:

<u>Mailing Address:</u> 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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

(<u>Name of the Limited Liability Compa</u> (A Florida Limited L	ny as it now appears on our records.) Jability Company)
The Articles of Organization for this Limited Liability Company Florida document number <u>L23000540696</u> .	were filed on $\frac{12/06/2023}{}$ and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabi	ility company here:
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "L.L.C." or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	1421 SW 107 Ave , Suite 229
Principal office address MUST BE A STREET ADDRESS)	miami, FL 33174
Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BOX)	1421 sw 107 Ave, Suite 229 miami, FL 33174
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	196 2 ·
Name of New Registered Agent: Angel	Rodviquez Pig q
New Registered Office Address: 142/5	W 107 Ave Suite 229, Fig.
	Y)
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

<u>Title</u>	<u>Name</u>	Address	Type of Action
₽P_	Javier Timenez	10230 SW 65t	⊡Add
		miami, FL 33174	Remove
			□Change
<u>MGR</u> 1	Angel Rodriguez	1421 Sw 107 Ave, suite 2	29 XAdd
		miami, FL 33174	□Remove
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Effective	date, if other th	an the date of t	filing:				(option	al)	17F	
(If an effective Note: If t	ve date is listed, the other date inserted in a cifective date of	date must be specif this block does	ic and ca not med	mnot be prior at the applica	to date of filir thic statutor	ig or more than y filing requi	i 90 days after fi	ling.) Pursuar	n to 605.01 be listed	207 (3) as the
he record spord is filed.	pecifies a delayed (effective date, bu	it not an	i effective tii	ne, at 12:01	a.m. on the	earlier of: (b)	The 90th d	lay after t	he
Dated	January									
		Signature	un-	· 						
										
		Signature				ntative of a me	ember			

Filing Fee: \$25.00