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COVER LETTER

Division of Con		•	
PRESTIGE	EREAL ESTATE CONTRACT	TING LLC	
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	PIERRE ST JEAN		
		Name of Person	
	PIERRE ST JEAN LAW		
		ESTATE CONTRACTING LLC Name of Limited Liability Company ment and fee(s) are submitted for filling. concerning this matter to the following: RRE ST JEAN Name of Person RRE ST JEAN LAW Firm/Company N MILETARY TRAIL Address ST PALM BEACH, FL 33415 City/State and Zip Code 1050@MSN COM E-mail address: to be used for future annual report notification) Ing this matter, please call: 1561 Area Code Daytime Telephone Number Street Address: Registration Section Division of Corporations The Centre of Tallahassee	
	862 N MILITARY TRAIL	,	Liability Company ted for filing. he following: Name of Person Firm/Company Address 3415 City/State and Zip Code c used for future annual report nonfication) at (
		Address	
	WEST PALM BEACH, FI	L 33415	j ,
		City/State and Zip Code	
	PSI2050@MSN.COM		
		·	((fication)
PIERRE ST JEAN LAW		561 721 0922 at ()	
Name o	of Person	Area Code Daytir	ne Telephone Number
Enclosed is a check for t	he following amount:		
■ \$25.00 Filing Fee	Cl \$30.00 Filing Fee & Certificate of Status	Certified Copy	Certificate of Status & Certified Copy
Mailing Addre Registration	Section	Registration Se	
Division of C P.O. Box 633		The Centre of	Tallahassee
Tallahassee.	FL 32314	2415 N. Monro	oe Street, Suite \$10

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PRESTIGE REAL ESTATE CONTRACTING LLC	
(Name of the Limited Liability Company as it now appea (A Florida Limited Liability Company)	irs un our records.)
The Articles of Organization for this Limited Liability Company were filed on $\frac{\theta_0}{2}$	5/06/2024 and assigned
Florida document number L24000211684	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability company l	iere:
PRESTIGE HEALTH CARE CONTRACTING LLC	
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)	5 NO.
	157
	.;
Enter new mailing address, if applicable:	, (S)
(Mailing address MAY BE A POST OFFICE BOX)	
	- ·
B. If amending the registered agent and/or registered office address on our agent and/or the new registered office address here:	records, enter the name of the new register
Name of New Registered Agent:	
New Registered Office Address:	
	vida street address

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 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	<u>Address</u>	Type of Action
MGR	FAVORY, LUCKNER	3843 HEATHER DRIVE WESTGREENACRES	FL 3
			□Remove
			□Add
			
			□Change
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Note: If	re date, if other than the date of filing tive date is listed, the date must be specific an fille date inserted in this block does not a this effective date on the Department of	meet the applicable.	te of filing or more than 9 statutory filing require	(optional) 0 days after tiling.) ments, this date v	Pursuant to 605.0207 zill not be fisted as (
record d is file	specifies a delayed effective date, but no d.	t an effective time, a	at 12:01 a.m. on the ca	rlier of: (b) The	90th day after the
Pated _	06/04/24 Signore yia	Thember or authorized	1 representative of a men	aber	
	Significance of a	Enin	P. /		
	LUCKNER	TH VU	<u> </u>		

Filing Fee: \$25.00