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(Bu	Isiness Entity Nam	ne)
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	ORATION: Kendall Accountin	g & Tax Services Corp		
	4BER: P11000007489			
The enclosed Article	es of Amendment and fee are su	ibmitted for filing.		
Please return all corr	respondence concerning this ma	tter to the following:		
	Peter Gonzalez, EA			
		Name of Contact Person	n	
	Kendall Accounting & Tax S	Services Corp		
		Firm/ Company		
	4601 SW 154 Ct	• •		
		Address	,	
	Miami, Fl 33185			
	- ·	City/ State and Zip Cod	c	
Pete	er@Prestigetaxcentersea.com			
 -	E-mail address: (to be us	sed for future annual report	notification)	
For further informati	ion concerning this matter, pleas	se call:		
Peter Gonzalez, EA		at (
Name of Contact Person		Area Co	de & Daytime Telephone Number	
Enclosed is a check	for the following amount made	payable to the Florida Depa	artment of State:	
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle		

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED

2018 DEC 20 PM 2: 17

Kendall Accouting & Tax Services Corp		SECRE LARY OF STATE
(Name of Corporation as o	currently filed with the	Florida Dept./of.State)48868, FL
P11000007489		
(Document N	umber of Corporation (if	known)
Pursuant to the provisions of section 607,1006, Florida Statutis Articles of Incorporation:	tes, this <i>Florida Profit C</i>	orporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corpora	tion:	
Prestige Tax Centers Corp		The new
name must be distinguishable and contain the word "con "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc word "chartered," "professional association," or the abbrev	c," or "Co". A professi	or "incorporated" or the abbreviation
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>		
C. Enter new mailing address, if applicable:		
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)		
D. If amending the registered agent and/or registered off new registered agent and/or the new registered office		enter the name of the
Name of New Registered Agent		
(FI	orida street address)	·
New Registered Office Address;		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am for the content of the con	1 Agent: miliar with and accept to	he obligations of the position.
, , , , , , , , , , , , , , , , , , , ,		Parising A and k comment

Signature of New Registered Agent, if changing

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change. Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change. Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>PT</u>	John Do	<u>oc</u>	
X Remove	<u>V</u>	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	Title		Name	<u>Addres</u> s
l) Change		_		
Add				
Remove				
2) Change		_		
Add				
Remove				
3) Change		_		
Add				
Remove				
4) Change		-		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change		_		
Add				
Remove				

tach additional sheets, if necessary)	rticles, enter cha). (Be specific)				
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an amendment provides for an exc	change reclassif	Sestion or espec	ellation of issue	od charoc	
rovisions for implementing the am	endment if not	contained in the	amendment its	self:	
(if not applicable, indicate N/A)		-	_		
		 			
					
				<u> </u>	
					
				-	

•	12/10/2018	
The date of each amendment(s) ac	loption:	, if other than th
date this document was signed.		
Effective date <u>if applicable</u> :	0/2018	
Effective date in applicable.	tno more than 90 days after amendment	file date)
Note: If the date inserted in this bedocument's effective date on the De	lock does not meet the applicable statutory filing rec partment of State's records.	quirements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were add by the shareholders was/were su	pted by the shareholders. The number of votes cast for fficient for approval.	or the amendment(s)
	roved by the shareholders through voting groups. The each voting group entitled to vote separately on the a	
	for the amendment(s) was/were sufficient for approva	l
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were addaction was not required.	pted by the board of directors without shareholder act	ion and shareholder
☐ The amendment(s) was/were add action was not required.	pted by the incorporators without shareholder action :	and shareholder
12/10/2019		
Dated Signature	BASA	
selecte	rector, president or other officer – if directors or officed, by an interpretator – if in the hands of a receiver, trued inductory by that fiduciary)	
	PeterGonzalez, EA	
	(Typed or printed name of person signing)	
	President/CEO	
	(Title of person signing)	