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(((H22000404108 3)))



H220004041083ABCV

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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : INCFILE.COM LLC Account Number: I20220000070 : (888)462-3453 Fax Number : (877)919-2613

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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REGISTERED AGENT CHANGE PRESTIGE WORLDWIDE CARDS INC.

Certificate of Status	0	
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COVER LETTER

TO:	Amendment Section Division of Corporations	•
	, •	
SUR	JECT: PRESTIGE WORLDWIDE CARDS IN	C.
Name	of Corporation	
DOC	UMENT NUMBER: P21000099470	
The e	enclosed Statement of Change of Registered	Office/Agent and fee are submitted for filing.
Pleas	e return all correspondence concerning this	matter to the following:
LOVI	ETTE DOBSON	·
Name	e of Contact Person	
INCF	TLE.COM LLC	•
Firm/	Company	
17350	STATE HWY 249 #220	
Addr	ess	
HOU	STON, TEXAS 77064	
City/	State and Zip Code	
	EFILE 1234@INCFILE.COM	
E-ma	ail address: (to be used for future annual	report notification)
For f	urther information concerning this matter, p	lease call:
LOV	ETTE DOBSON	at (888) 462-3453
	Name of Contact Person	at (888) 462-3453 Area Code & Daytime Telephone Number
Enclo	osed is a \$35.00 check made payable to the	Department of State.
	Mailing Address: Amendment Section	Street Address: Amendment Section

(((H22000404108 3)))

Division of Corporations

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

CR2E045 (04/13)

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS (((H22000404108 3))) (((H22000404108 3)))

statement of ch	provisions of sections 607.0502, 617.050 ange is submitted for a corporation organ er to change its registered office or registe	ized under the laws of the State of FLOR	IDA
1 The name of	the corporation: PRESTIGE WORLDWID	E CARDS INC.	
2. The principal	office address: 36105 SW 192 AVE HOM	ESTEAD, FL 33034	
3. The mailing:	address (if different); 36105 SW 192 AVE	HOMESTEAD, FL 33034	
4. Date of incor	address (if different): 36105 SW 192 AVE poration/qualification: 11/22/2021	Document number: P21000099470	
5. The name an	d street address of the current registered a rtment of State: (If resigned, enter resigne	gent and registered office on file with the	
	LEGALINC CORPORATE SERVICES II	NC.	
	476 RIVERSIDE AVE.		
	JACKSONVILLE, FL 32202		2022 k
6. The name an (if changed):	d street address of the new registered ager	nt (if changed) and /or registered office	2022 NOV 30
	Christopher Sierra		
	521 Sw 182 Way		ညၗ ထဲ ့∞∞
	P.O. 800 Miramar, FL 33029	NOT acceptable	ယ်
The street addr	ress of its registered office and the street I be identical.	address of the business office of its regi	istered agent,
	as authorized by resolution duly adopted the board, or the corporation has been no		
Christ	ishu suna	Christopher Sierra	
I hereby accep	t the appointment as registered agent an to comply with the provisions of all state and familiar with and accept the oblining filed merely to reflect a change in this been notified in writing of this change.	Printed or typed name and title d agree to act in this capacity, utes relative to the proper and complete igation of my position as registered age e registered office address. I hereby con	e performance int. Or, if this infirm that the
Christ	soul way	11/30/2022	
	gnature of Registered Agent ehalf of an entity:	Date	
	Typed or Printed Name		
	* * * FILING FE	Œ: \$35.00 * * *	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (04/13)