Name and Address of Current Registered Agent.				
CLARK, DONNA 998 SW 4TH STREET BOCA RATON, FL 33486 US				
The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.				
SIGNATURE	: DONNA CLARK			03/06/2019
	Electronic Signature of Registered Agent			Date
Officer/Director Detail :				
Title	DP	Title	DST	
Name	CLARK, DONNA	Name	MASSON, DIANE	
Address	998 SW 4TH STREET	Address	334 14TH STREET	
City-State-Zip:	BOCA RATON FL 33486	City-State-Zip:	NEW ORLEANS LA 70124	
	CLARK, DONNA 998 SW 4TH ST BOCA RATON, The above named SIGNATURE Officer/Direc Title Name Address	998 SW 4TH STREET BOCA RATON, FL 33486 US The above named entity submits this statement for the purpose of changing its regist SIGNATURE: DONNA CLARK Electronic Signature of Registered Agent Officer/Director Detail : Title DP Name CLARK, DONNA Address 998 SW 4TH STREET	CLARK, DONNA 998 SW 4TH STREET BOCA RATON, FL 33486 US The above named entity submits this statement for the purpose of changing its registered office or register SIGNATURE: DONNA CLARK Electronic Signature of Registered Agent Officer/Director Detail : Title DP Title Name CLARK, DONNA Name Address 998 SW 4TH STREET Address	CLARK, DONNA 998 SW 4TH STREET BOCA RATON, FL 33486 US The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Floc SIGNATURE: DONNA CLARK Electronic Signature of Registered Agent Officer/Director Detail : Title DP Title DST Name CLARK, DONNA Name MASSON, DIANE Address 998 SW 4TH STREET Address 334 14TH STREET

998 SW 4TH STREET BOCA RATON, FL 33486 US

FEI Number: 27-0205467

Current Mailing Address:

Name and Address of Current Registered Agent:

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

DP

SIGNATURE: DONNA CLARK

Electronic Signature of Signing Officer/Director Detail

Certificate of Status Desired: Yes

03/06/2019

Date

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000010093

Entity Name: PRIME FORCE II, INC.

Current Principal Place of Business:

998 SW 4TH STREET BOCA RATON, FL 33486