

105000094193

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

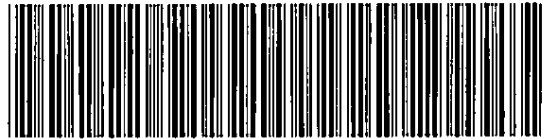
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000372761770

11/17/21--01002--001 **55.00

RECEIVED
2021 NOV 16 AM 9:36
ALLAHABAD, INDIA

Put Filed copy in
QWIK COURIER-Box

850-284-4584

PLEASE PROCESS THE FOLLOWING.

PLEASE DO NOT PUT OUR NAME ON COVER LETTER

PLEASE USE NAME ON THE REQUEST.

PLEASE PUT IN OUR BOX WHEN COMPLETED

CUSTOMER Prime International
Properties Duval, LLC

name of person

Syed, S. Hussain

COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: PRIME INTERNATIONAL PROPERTIES DUVAL, 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:

SYED S. HUSSAIN

Name of Person

PRIME INTERNATIONAL PROPERTIES DUVAL, LLC

Firm/Company

7685 103RD ST SUITE 1

Address

JACKSONVILLE, FL 32210

City/State and Zip Code

peacehealmd@aol.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

SYED S. HUSSAIN

904 614-0606
at ()
Area Code Daytime Telephone Number

Name of Person

Enclosed is a check for the following amount:

- | | | | |
|---|--|---|--|
| ☐ \$25.00 Filing Fee | ☐ \$30.00 Filing Fee &
Certificate of Status | ☒ \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | ☐ \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed) |
|---|--|---|--|

Mailing Address:

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

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>	<u>Address</u>	<u>Type of Action</u>
AMBR	SYED, WASEEM H	7685 103RD ST SUITE 1	☐ Add
		JACKSONVILLE, FL 32210	☒ Remove
			☐ Change
AMBR	HUSSAIN, SYED I	2339 GLENFINNAN DRIVE	☐ Add
		ORANGE PARK, FL 32073	☒ Remove
			☐ Change
			☐ Add
			☒ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change

2021 NOV 15 AM 9:36
SECRET
ITAL

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated November 16, 2021

1st: Jerry L. Sessions, 11

Signature of a member or authorized representative of a member

Jerry L. Sessions, II, Esquire Fla. Bar No.: 848735

Typed or printed name of signee

Filing Fee: \$25.00