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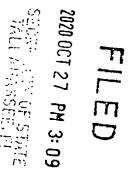
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COVER LETTER

TO:

Registration Section Division of Corporations

PRIMECO	R CONSTRUCTION, LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Ekaterina Eroshenko		
		Name of Person	
	PRIMECOR CONSTRUC	TION, LLC	
		Firm/Company	
	1661 West Ave.		
	_	Address	
	398525, Miami Beach, FL	33239	
		City/State and Zip Code	
	Katerinaero@gmail.com		
	E-mail address: (to be used for future annual report noti	fication)
For further information c	oncerning this matter, please c	all:	
Ekaterina Eroshenko		786 693-3972	
Name o	f Person	at () Area Code Daytim	e Telephone Number
Enclosed is a check for t	he following amount:		
☐ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55,00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address Registration 5 Division of C P.O. Box 632 Tallahassee, 1	Section Corporations 27	Street Address: Registration Sec Division of Cor The Centre of T 2415 N. Monro Tallahassee, FL	porations fallahassee e Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PRIMECOR CONSTRUCTION, LLC

(<u>Name of the Limited Liability Comp</u> (A Florida Limited	any as it now appears on our re Liability Company)	cordy.)
The Articles of Organization for this Limited Liability Company Florida document number L09000061623	y were filed on 06/25/2009	and assigned
This amendment is submitted to amend the following:		
A. If amending name, <u>enter the new name of the limited lial</u>	bility company here;	
The new name must be distinguishable and contain the words "Limited Liab	ility 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)		<u>2020</u>
Enter new mailing address, if applicable:	1661 West Ave.	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
(Mailing address MAY BE A POST OFFICE BOX)	PO Box 398525	
The state of the s	Miami Beach, FL 33239	<u> </u>
B. If amending the registered agent and/or registered office agent and/or the new registered office address here: Name of New Registered Agent:	address on our records, en	ter the name of the new registers
New Registered Office Address:		
	Enter Florida street ad	
·	City	Florida = Zip Code
New Registered Agent's Signature, if changing Registered Agent	, :	·
hereby accept the appointment as registered agent and agrovisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered office company has been notified in writing of this change.	- ree to act in this capacity. A performance of my duties provided for in Chapter 60	, and I am familiar with and 15, F.S. Or, if this document is
If Cha	nging Registered Agent, Signatu	re 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

Title	Name	<u>Address</u>	Type of Action
MGR	NJ Management, LLC	1621 Bay Road #601.	□Add
		Miami Beach, Fl. 33139	=Remove
			□Change
MGRM	Ekaterina Eroshenko	1661 West Ave.	= Add
		PO Box 398525, Miami Beach, FL 33239	□Remove
			□Change
			A Rephove
			Rethove
			Sa Dange D
			□Remove
			□Change
			🗆 Add
			□Remove
			□Change
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			□Remove
			□ Change

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		27
 (If an effective date is listed, the date mus 	ock does not meet the applicable statutory fili	(optional) more than 90 days after filing.) Pursuant to 605.0207 (3)(b) ing requirements, this date will not be listed as the
If the record specifies a delayed effective record is filed.	date, but not an effective time, at 12:01 a.m	, on the earlier of: (b) The 90th day after the
Dated October 20	. 2020	
	Signature of a member or authorized representative	
	Signature of a member or authorized representative	ve of a member
Ekaterina Eroshenko	Typed or printed name of signee	

Filing Fee: \$25.00