#109000070886

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EXAMINER
DEC 1 4 2010

COVER LETTER

TO: Registration Section Division of Corporations						
SUBJECT:	Prime International Trading LLC					
Jobsec 1.	Name of Limited Liability Company					
The enclosed Articles of Amendment and fee(s) are submitted for filing.						
Please return all corr	espondence concerning this matter to the following:					
	Anthonny J Goncalves Name of Person					
	· · · · · · · · · · · · · · · · · ·					
	Prime International Trading LLC Firm/Company					
	6303 Blue Lagoon Dr Ste 400 Unit 463					
	Address					
	Miami FL 33126					
City/State and Zip Code						
primeint.llc@gmail.com E-mail address: (to be used for future annual report notification)						
For further informati	on concerning this matter, please call:					
	James P. Gagel at (305) 4447775					
Na	ne of Person Area Code & Daytime Telephone Number					
Enclosed is a check	or the following amount:					
\$25.00 Filing Fee	\$30.00 Filing Fee & \$55.00 Filing Fee & \$60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)					
Re Di P.0	AILING ADDRESS: gistration Section vision of Corporations Division of Corporations Division of Corporations Division of Corporations Clifton Building lahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301					

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

FALED

10 DEC 13 PM 2: 00

SECRETARY OF STATE TALLAMASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company Florida document numberL09000070886	were filed on 07/23/2009 and assigned			
This amendment is submitted to amend the following:				
A. If amending name, <u>enter the new name of the limited liab</u>	oility company here:			
The new name must be distinguishable and end with the words "Limi" "L.L.C."	ited Liability Company," the designation "LLC" or the abbreviat	ior		
Enter new principal offices address, if applicable:	6303 Blue Lagoon Dr Ste 400 Unit 463	_		
(Principal office address MUST BE A STREET ADDRESS)	Miami FL 33126	_		
		-		
Enter new mailing address, if applicable:	6303 Blue Lagoon Dr Ste 400 Unit 463			
(Mailing address MAY BE A POST OFFICE BOX)	Miami FL 33126			
		-		
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		ew		
Manus Care Daniel Anthonny 1	Concelves			
Name of New Registered Agent: Anthonny J Goncalves				

New Registered Agent's Signature, if changing Registered Agent:

New Registered Office Address:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

6303 Blue Lagoon Dr Ste 400 Unit 463

Miami

City

If Changing Registered Agent Signature of New Megistered Agent

Enter Florida street address

Florida

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member

<u>Title</u>	Name	Address	Type of Action
MGRM	Anthonny J Goncalves	6303 Blue Lagoon Dr Ste 400 Unit 463 Miami FL 33126	Add Remove
<u>MGRM</u>	Inversiones Automotion ca	Av intercomunal Santiago Marino Saman de Guere Galpon 80-82 Maracay, Venezuela 2107	_ ✓ Add ☐ Remove
MGR	Mario Suarez	6303 Blue Lagoon Dr Ste 400 Unit 463 Miami FL 33126	_☑ Add Remove
<u>MGRM</u>	Goncalves, Anthonny J	2315 NW 107 Ave Ste 1M34 Doral FL 33172	Add Remove
<u>MGRM</u>	Goncalves, Jose	2315 NW 107 Ave Ste 1M34 Doral FL 33172	Add √Remove
MGR	Goncalves, Jully	2315 NW 107 Ave Ste 1M34 Doral FL 33172	Add Remove
D. If amend	ling any other information, enter chang	c(s) here: (Attach additional sheets, if necessary.)	-
			-
			-
Dated	DECEMBER OI, ZO	10	
	Signature of a member	r or supported representative of a member	
		NY GONCALVES	
	Typed	or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00