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EXAMINER

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COVER LETTER

→ TO: Negistration Section
Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

SUBJECT:	PRIMUS REA	ALTY HOLDINGS I,	LLC		
		mited Liability Company			
The enclosed Articles	of Amendment and fee(s) are s	submitted for filing.			
Please return all corre	spondence concerning this mat	ter to the following:			
		STEPHEN V. HOFFMAN			
		Name of Person			
	MASTRIANA & CHRISTIANSEN, PA				
		Firm/Company	·	2011 HAY 17 PH 2: 44	
	1500 N. FEDERAL HIGHWAY, STE. 200				
		Address		SSE 7	
	FT. LAUDERDALE, FL 33304				
•		City/State and Zip Code			
	S	TEVE@M-C-LAW,CON	<u>M</u>		
• For further information	n concerning this matter, please	·	он пошисаноп)		
i or turner information	reorderning this matter, prease	cair.			
	EVE HOFFMAN	at (_954_)	566-1234		
Nam	e of Person	Area Code &	Daytime Telephone Number	r	
Fuctored is a check for	r the following amount:				
✓ \$25.00 Filing Fee	\$30.00 Filing Fee &	USS 00 Eiling Eog R	□ 6 €0.00 E3	in C	
▼] \$23.00 Fining CC	Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is en	nclosed) Certified	te of Status &	
MAI	LING ADDRESS:	STREET/C	COURIER ADDRESS:		
	stration Section sion of Corporations	Registration			

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PKIMU (Name of the Limite	JS REALTY	HOLDINGS	I, LLC	<u> </u>		
(Name of the Limited	A Florida Limited	Liability Company	y)	<u>s.</u>)		
The Articles of Organization for this Limited L Florida document numberL1100003	•	ny were tiled on	MARCH 16, 2	2 <u>011</u> a	nd assig	ined
This amendment is submitted to amend the following	lowing:					
A. If amending name, enter the new name of	<u>f the limited lia</u>	bility company h	<u>tere</u> :			
-	N	/A				
The new name must be distinguishable and end wi "L.L.C."	th the words "Li	mited Liability Corr	npany," the designat	ion "LLC" e	r the abl	breviation
Enter new principal offices address, if applied	cable:	N/A		<u> </u>	20	
(Principal office address MUST BE A STREET ADDRESS)				<u> </u>		
				75	~	
•				(C) .₩ 77 =K 70 -×	7	Annual las
Enter new mailing address, if applicable:	N/A		<u> </u>	PH		
(Mailing address MAY BE A POST OFFICE BOX)		<u> </u>		33	ري دي	S.,
				(C)) 21	£	
B. If amending the registered agent and/ registered agent and/or the new registered of Name of New Registered Agent:	or registered of fice address he	office address on erc:	our records, <u>en</u>	ter the na	me of	the new
New Registered Office Address:	<u>N/A</u>		2 121 11			
		I.	Enter Florida stree	i adaress		
			, Florid	a	<u> </u>	
		City		Zip	Code	

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

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.

If Changing Registered Agent, Signature of New Registered Agent

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

2 to 12 m

	I = Managing Member		
<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGRM	M POTENS DUO, LL	C 1301 E. BROWARD BLVD., STE, 330 FORT LAUDERDALE, FL 33301] ☐ Add
MGR	POTENS DUO, LL	C 1301 E. BROWARD BLVD., STE, 330 FORT LAUDERDALE, FL 33301	Add Remove
	<u> </u>		Add Remove
			Add Remove
			Add Remove
			A KAdax A KAdax A Comeve T
D. If am	nending any other information	, enter change(s) here: (Attach additional sheets, if necessary.)	7 PH 2: H
			—
Dated	Man 10	7.011	 -
134(0)	Signatur	Melin RESOLDER	
	Claudio	P. Bullanc, Maryle Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00