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J. BRYAN

JUN - € 2012

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Prigrity HZ Name of Limi	ited Liability Company	
·		
The enclosed Articles of Amendment and fee(s) are sul	bmitted for filing.	
Please return all correspondence concerning this matter	r to the following:	
G	Name of Person Price Hy Firm/Company	THE LET STATE OF THE STATE OF T
43.	60 NE 3rd (
E-mail address:	City/State and Zip Code Ocylos Chot to be used for future annual report notification	mail.com
For further information concerning this matter, please of	call:	
Name of Person	at (352) 509 - 320 Area Code & Daytime Tel	lephone Number
Enclosed is a check for the following amount: \$\sum_{\text{S}} \sum_{\text{S}} \sum_{\text{S}} \sum_{\text{S}} \sum_{\text{S}} \sum_{\text{S}} \sum_{\text{S}} \sum_{\text{S}} \sum_{\text{S}} \text{S} \text{S} \text{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:	STREET/COURIER	ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

- Vriprity H20	OLLC.			
(<u>Name of the Limițed Liabilit</u> (A Florida	ty Company as it now appea Limited Liability Company)	rs on our records.)		
The Articles of Organization for this Limited Liability Florida document number		May 75012 and assigned		
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the lin	nited liability company he			
The new name must be distinguishable and end with the we "L.L.C."	ords "Limited Liability Comp	any," the designation "LLC" of the abbreviation		
Enter new principal offices address, if applicable:		70 !		
(Principal office address MUST BE A STREET ADD	RESS)	<u> </u>		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)				
B. If amending the registered agent and/or registered agent and/or the new registered office add	stered office address on dress here:	our records, enter the name of the new		
Name of New Registered Agent:				
New Registered Office Address:				
	Enter Florida street address			
		, Florida		
	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>:

MGR = Manager MGRM = Managing Member

<u>Title</u>	Name	Address	Type of Action			
Member	Lean Martin Rouse III	12140 SE 101 Ct	Add Remove			
			Add Remove			
		Pro	Add Remove			
			Add Reflove			
			Add United Property of the Control o			
State of the state			Add Remove			
D. If amend	ling any other information, enter change(s) here: (Attach additional sheets, if necessary.)				
1	Idding Member, he	is not a Monager or Mona	ging			
بر	tember and a make	is not a Monager or Mona	0			
		ITT He owns 209				
		of Priority H20				
	\wedge		FCC			
	Belleview Fl 3443	Δ				
Dated(6-4-2012	·				
	Q	4 ()) >				
Signature of a member of authorized representative of a member						
Typed or printed name of signed						

Page 2 of 2

Filing Fee: \$25.00