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D. BRUCE

COVER LETTER

TO: Registration Section Division of Corpor				
SUBJECT: PREVALE		ed Liability Company		
The enclosed Articles of Ame		•		
Please return all corresponde	nce concerning this matter	to the following:		
-	ADRIAN F	HERNANDEZ Name of Person		
-	PREVALE	GREEN LLC Firm/Company		
-	1005 E.S	SUWANNEE AVE Address		
-	LAKELANI	O, FL 33815 City/State and Zip Code		
_	rosaecingari@y E-mail address: (to	yahoo . com o be used for future annual report notifical	ion)	
For further information conce			T 20 20	•
ADRIAN HERNAN		at (<u>863)</u> <u>808–3031</u> Area Code & Daytime T	elephone Number ARY	7
Enclosed is a check for the fo	ollowing amount:		AM II	
\$25.00 Filing Fee 5	2\$30.00 Filing Fee & Certificate of Status	□\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate F Status Certificate F Status Certified Copy (additional copy is enclo	sed)

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PREVALE GREEN LLC		
(<u>Name of the Limited Liability C</u> (A Florida Lin	Company as it now appears on our records. mited Liability Company)	
The Articles of Organization for this Limited Liability Con Florida document number <u>L13000103065</u>		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limite	ed liability company here:	
PREVAIL GREEN LLC The new name must be distinguishable and end with the words "L.L.C."	"Limited Liability Company," the designation	n "LLC" or the abbreviation
Enter new principal offices address, if applicable:	SAME	
(Principal office address MUST BE A STREET ADDRE	<u>(SS)</u>	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	SAME	SECRETARY SECRETARY
B. If amending the registered agent and/or register registered agent and/or the new registered office address		er (George of the new Ser (Second)
Name of New Registered Agent:	SAME	
New Registered Office Address:	Enter Florida street	address
	*** · *	
	, Florida , Florida	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, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Mar MGRM = M	nager lanaging Member		
<u>Title</u>	Name	<u>Address</u>	Type of Action
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Filing Fee: \$25.00

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