

213000106997

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

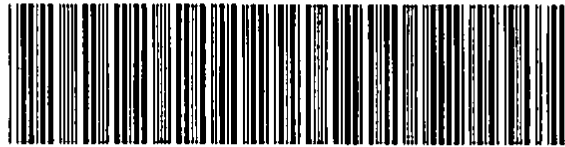
(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA
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O SIMMONS
AUG 10 2017

COVER LETTER

TO: **Registration Section -
Division of Corporations**

SUBJECT: Florida Prime Builders, LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Erik Mogelvang

Name of Person

Florida Prime Builders, LLC

Firm/Company

2590 Golden Gate Parkway, Suite 106

Address

Naples FL 34105

City/State and Zip Code

nikki@floridaprime.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Erik Mogelvang

239

417-2222

at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$25.00 Filing Fee

☒ \$30.00 Filing Fee &
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:

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**

Florida Prime Builders, LLC

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

The Articles of Organization for this Limited Liability Company were filed on 01/26/2015 and assigned
Florida document number L13000106997.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

Enter new principal offices address, if applicable:

Principal office address MUST BE A STREET ADDRESS

Enter new mailing address, if applicable:

Mailing address MAY BE A POST OFFICE BOX

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent: Padly Law PA


New Registered Office Address: 1300 3rd Street South Suite 302A

Enter Florida street address

Naples, Florida 34102
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 605, 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

amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added
removed from our records:

IGR = Manager
MBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MBR	Erik Mogelvang	2590 Golden Gate Parkway	<input type="checkbox"/> Add
		Suite 106	<input type="checkbox"/> Remove
		Naples, FL 34105	<input checked="" type="checkbox"/> Change
MBR	Edward Burnham, Sr	4910 Mahogany Ridge Drive	<input checked="" type="checkbox"/> Add
		Naples, FL 34119	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
IGR	Cynthia Mogelvang	2590 Golden Gate Parkway	<input type="checkbox"/> Add
		Naples FL 34105	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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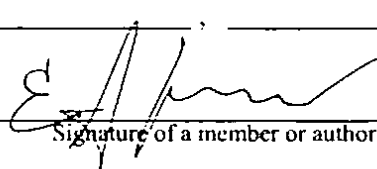
Effective date, if other than the date of filing: 08/01/2017 (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:
) The 90th day after the record is filed.

Dated _____


Signature of a member or authorized representative of a member

Erik Mogelvang

Typed or printed name of signer