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SECRETARY OF STATE,

FEB 0 4 2015 S. YOUNG

TO ARTICLES OF ORGANIZATION OF

YOUNIQUE, LLC.

(A Florida Limited	l Liability Company)	
The Articles of Organization for this Limited Liability Compan	y were filed on <u>OA [26 [20]3</u>	and assigned
Florida document number L13coo136453		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	bility company here:	
PRIME ALL INSTINCT.	LLC.	
The new name must be distinguishable and end with the words "Limited Lie	ability Company," the designation "LLC" or the a	bbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		· · · · · · · · · · · · · · · · · · ·
Enter new mailing address, if applicable:	PO BOX DELAMA	213146
(Mailing address MAY BE A POST OFFICE BOX)	ROYAL PALM BERY	CH. FL
	33421	
B. If amending the registered agent and/or registered	office address on our records, enter	्र the name of the new
registered agent and/or the new registered office address he		祖皇丁
		湯に
Name of New Registered Agent:		
New Registered Office Address:		20 20 20 20 20 20 20 20 20 20 20 20 20 2
	Enter Florida street address	हिंत ह
	, Florida	. -

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.

City

If Changing Registered Agent, Signature of New Registered Agent

Zip Code

S. GOB. 402 & PURPOSE & HOUSTIC LIFESTYLE COACHING, HEACH COACHING, WEIGHT-LOSS COACHING + TRAINING, HEACHY AND NATURAL PRODUCTS AND FOODS. E. Effective date, if other than the date of filing: (Optional) (The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State) Dated JANUARY Signature of a number or authorized representative of a member

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00

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15 JAN 27 PH 2: 45
SECRETARY OF STATE