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COVER LETTER

TO:

Registration Section
Division of Corporations

SUBJECT:

Prima Real Estate Holdings, 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:

Alex H Lucchesi

Name of Person

Prima Real Estate Holdings LLC

Firm/Company

4348 47th Street

Address

Sarasota, FL 34235

City/State and Zip Code

lucchesi513@gmail.com

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

For further information concerning this matter, please call:

Alex H Lucchesi

*,,*941 (623595)

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

Prima Real Estate Holdings, LLC	<u>. </u>
(Name of the Limited Liability Company as it now appear (A Florida Limited Liability Company)	ars on our records.)
The Articles of Organization for this Limited Liability Company were filed on Office of December 14000030634.	2/21/2014 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability company h	<u>iere</u> :
The new name must be distinguishable and end with the words "Limited Liability Company," th	e designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	i.:1
Principal office address MUST BE A STREET ADDRESS)	
	Sel (19)
	7
Enter new mailing address, if applicable:	Гас тэ · .
Mailing address MAY BE A POST OFFICE BOX)	
	RIO
	35-
B. If amending the registered agent and/or registered office address or registered agent and/or the new registered office address here:	n our records, enter the name of the ne
egistered agent and/or the new registered office address here.	•
Name of New Registered Agent:	
New Registered Office Address:	
Enter Fl	orida street address
	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

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager

<u>:le</u>	<u>Name</u>	Address	Type of Acti
MBR	Simone N. Lucchesi	27 E Ave	■ Add
		Lake Oswego, OR 97034	Remove
		 	····
			□ Add
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ffective date must be specific, cannot late this document is filed by the Flor defined by the Flor March 7	t be prior to date of receipt or filed date and cannot rida Department of State) , 2014 Gignature of a member or authorized representative	be more than 90 days after

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Filing Fee: \$25.00