

L14000053138
Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850)617-6383

From: Account Name : PRIME KEYS SOLUTIONS, LLC
Account Number : I20140000094
Phone : (305)856-6121
Fax Number : (305)856-6122

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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FLORILINDA LLC**

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Handwritten signature and date
10/6/14

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

FLOREINDA LLC

Name of the Limited Liability Company (if it now appears on our records.)
(Federal Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on April 1st, 2014 and assigned Florida document number L14000053138

This amendment is submitted to amend the following:

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

(A new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C.")

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:

New Registered Office Address:

(One location only)

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.

If Changing Registered Agent, Signature of New Registered Agent

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ALLEN D. ROSE, FLORENZA

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
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Jeannette Almeida Quevedo	1541 Brickell Avenue- Suite 1806	<input type="checkbox"/> Add

		Miami, Florida 33129	<input checked="" type="checkbox"/> Remove
--	--	----------------------	--

MGR	Leonardo Urdaneta	1541 Brickell Avenue - Suite 1806	<input checked="" type="checkbox"/> Add
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		Miami, Florida 33129	<input type="checkbox"/> Remove
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MGR	Carolina Rodrigues	1541 Brickell Avenue - Suite 1806	<input checked="" type="checkbox"/> Add
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		Miami, Florida 33129	<input type="checkbox"/> Remove
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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

E. Effective date, if other than the date of filing: _____ (optional)
The effective date must be specified and must be prior to date of receipt of this date and cannot be more than 90 days after the date this document is filed by the Florida Department of State.

Dated Sept 23 2014

(Signature)

 Signature of candidate or individual or representative of a member
Jeannette Almeida Quevedo

 Type or printed name of signer

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