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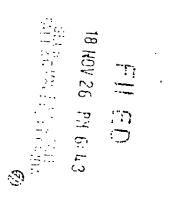
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## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: Prime Referral Associates 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:
Jean L. Shorts Name of Person
Prime Referral Associates
5642 White lbis Ln. Address
City/State and Zip Code  Jean, Shorts @gmail.com  Hamil address: (to be used for future animal report notification)
1ean. Shorts @gmail.com Email address: (to be used for future annual report notification)
For further information concerning this matter, please call:
<u>Jean Shorts</u> at ( <u>813</u> ) <u>165-1717</u> Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\ \text{Certificate of Status} \text{Certified Copy} \text{(additional copy is enclosed)} \text{Certified Copy} \text{(additional copy is enclosed)} \text{Certified Copy} \text{(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

Prime Refero (Name of the Limited Liability Comp (A Florida Limited	any as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number <u>L14000086810</u> .	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited lial	bility company here:
The new name must be distinguishable and contain the words "Limited Liab	ility 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)	Prime Referral Associates, LLC 5642 White Ibis Ln. Land O'Lakes, FL 34638
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	Prime Referral Associates, LLC 5642 White Ibis Ln. Land O'Lakes, FL34638
B. If amending the registered agent and/or registered or registered agent and/or the new registered office address here.	office address on our records, enter the name of the new
Name of New Registered Agent: Je	an L. Shorts & & =
New Registered Office Address: 5643	Enter Florida street address  1022KeS, Florida, 34638
New Registered Agent's Signature, if changing Registered Agent	City Zip Code

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

MGR = Mai AMBR = Aut	nager thorized Member		
Title	Nomo	Address	T

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Adam J. Shorts	5845 Alder brook Pl.	Add
		Land O'Lakes, FC	□ Remove
		34638	Change
AMBR	Jean L. Shorts	5642 White lbis Ln	<b>D</b> Add
		Land O'Lakes, FC	Remove
		34638	Change
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