L15000154751

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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	





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COVER LETTER

TO: Registration Section Division of Corporation		1 97	
SUBJECT:		erprises LLC ited Liability Company	
The enclosed Articles of Am	nendment and fee(s) are sub-	mitted for filing.	
Please return all corresponde	ence concerning this matter	to the following:	
		Edwin Tejada Name of Person	
	Prin	nos Enterprises	UC
	45	4 Dewey Johnson	on Way
	G	ctna FL 32 City/State and Zip Code	332
-	E-mail address: (1	os en ter posee (o o o o to be used for future annual report notif	+100/L.10 m
For further information cone	terning this matter, please ca	att:	•
Name of Pe	Tejada	at (650) 361 Area Code Daytime	- 1943 Telephone Number
Enclosed is a check for the f	following amount:		
□ \$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address: Registration Sec	otion.	Street Address: Registration Sec	ition

Registration Section Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PRIMO'S ENTERPRISES LLC			
(Name of the Lim	ited Liability Compa (A Florida Limited)	ny as it now appears on our rec Liability Company)	ords.)
The Articles of Organization for this Limited I Florida document number L15000154751	_iability Company	were filed on	and assigned
This amendment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name	of the limited liab	ility company here:	
√A			
he new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the designation "I	LC" or the abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:	N//A	
Principal office address MUST BE A STRE	ET ADDRESS)		
		N// A	
Inter new mailing address, if applicable:		<u>N/A</u>	
<u>Mailing address MAY BE A POST OFFICE</u>	E BOX)		
B. If amending the registered agent and/or	registered office :	address on our records, en	ter the name of the new regist
gent and/or the new registered office addr		_	94. TI
Name of New Registered Agent:	Edwin Tejada		
New Registered Office Address:	454 Dewey Joh	inson Way	
new registered Office Address.		Enter Florida street add	tress :
	Gretna		Florida 32332 -
		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

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 = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Jose Munos	454 Dewey Johnson Way	□Add
		Gretna, FL 32332	■Remove
			□Change
			□Add
			□ Remove
			Change
			□Add
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N/A			
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fective date, if other than the	date of filin	e: (ontional)	
in effective date is listed, the date mu	st be specific and	g: (optional) d cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605	5.020
ote: If the date inserted in this blocument's effective date on the D	epartment of S	meet the applicable statutory filing requirements, this date will not be liste State's records.	ea a
	•		
ecord specifies a delayed effective	e date (but no	t an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after	r the
is filed.		,	
May 07		2021	
		E W	
		V X 1/1/()	
	Signature of a	member or authorized representative of a member	

Filing Fee: \$25.00