115000179211

(Re	equestor's Name)	
(Ad	ldress)	
·	•	
	I.d	
(Ad	ldress)	
(Cit	ty/State/Zip/Phon	e #)
PICK-UP	MAIT WAIT	MAIL
	ringer Entity No.	
ua)	isiness Entity Nar	me)
(Do	cument Number)	
Certified Copies	_ Certificate:	s of Status
		
Special Instructions to	Filing Officer:	
		İ

Office Use Only



200373809102

09/24/21--01010--030 **25.00

2021 SEP 24 PH 2: 1

n PRUCE OCT 03 2021

COVER LETTER

TO:

Registration Section Division of Corporations

Tallahassee, FL 32314

	1A VISTA LLC					
SUBJECT:	Name of Lin	nited Liability Company				
The enclosed Articles of	Amendment and fee(s) are sul	omitted for filing.				
Please return all correspo	ondence concerning this matter	to the following:				
	Peter A. Economys					
		Name of Person				
	PM PRIMA VISTA LLC					
		Firm/Company				
	481 SW Port St.Lucie Blv	d., Ste. D				
	-	Address				
	Port St. Lucie, Fl. 34953					
		City/State and Zip Code				
	ekonomy@yahoo.com				20.	
For further information of	E-mail address: (concerning this matter, please c	to be used for future annual reportable:	n notification)	ALLA	2021 SEP 24	
Peter A. Economys		772 408	3 6190			
Name o	of Person	Area Code D	aytime Telephone Number	122 ; -	PH 2: 1	
Enclosed is a check for t	he following amount:			· · · · ·	ಪ	
■ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed	Certified (e of Status		
Mailing Address Registration S Division of C P.O. Box 632	Section Corporations					

2415 N. Monroe Street. Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PW PRIMA VISTA ELC				
(Name of the Limited Liability Company as it now app (A Florida Limited Liability Compan	ocars on our records.)			
The Articles of Organization for this Limited Liability Company were filed on	10-21-2015	an	d assigi	ned
lorida document number L15000179211				
his amendment is submitted to amend the following:				
. If amending name, enter the new name of the limited liability company	<u>; here</u> :			
he new name must be distinguishable and contain the words "Limited Liability Company," the	he designation "LLC" or the	abbreviation	on "L.L.C	2."
nter new principal offices address, if applicable:				
Principal office address MUST BE A STREET ADDRESS)				<u>.</u>
		CO	202	
		<u> </u>	S	T-PT-NEW
		177) 1.4 2742	SEP	
nter new mailing address, if applicable:		25-1		
Auiling address MAY BE A POST OFFICE BOX)	<u> </u>			- 10
		-	The	-412g
	-		:3	
. If amending the registered agent and/or registered office address on ou	r records, enter the n:	•	e ńe w r	egister
gent and/or the new registered office address here:	· 			
Name of New Registered Agent:				
New Registered Office Address:	Florida street address			
tmer i	curiaa sireei aaaress			
	Florida			

New Registered Agent's Signature, if changing Registered Agent:

DIA DUDIA A MICTA LLC

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

Zip Code

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>	<u>Address</u>	Type of Action
AMBR	Michael Matakaetis	481 SW Port St. Lucie Blvd. Suite D	□Add
		Port St. Lucie, Florida 34953	≘ Remove
			□Change
AMBR	Peter Economys	481 SW Port St. Lucie Blvd., Suite D	□Add
		Port St. Lucie, FL 34953	□Remove
			■ Change
			Difference 1
			Change 7
			Remove
			□Change
			□Add
			□Remove
			Change
			□Add
			🗀 Remove
			□ Change

				·				
			-		<u>.</u>			
								
						U.T.	2021	
-						- 7. C	21 SEP	21
						<u> </u>	N	1
						<i>></i> 5.	-10-	ن س ن ا
						€ri -	- 차 - 프	-12.00 10.00
						<u> </u>	$\frac{\cdot \cdot}{\omega}$	
fective date, if other than	iis błock does no	iing: and cannot be ρ ot meet the ap	plicable statuto	ng or more than 90 ry filing requiren	(optional) days after filing tents, this date) .) Pursuant : will not b	to 605.0 be listed	207 I as
ote: If the date inserted in th						a Onth da	y after t	he
ote: If the date inserted in the cument's effective date on the contract of th	ective date, but	not an effectiv	ve time, at 12:0	I a.m. on the eart	ier of: (b) Tl	ie 70m da		
ote: If the date inserted in the cument's effective date on the cecord specifies a delayed efficient is filed.	ective date, but	not an effectiv	ve time, at 12:0	l a.m. on the earl	ier of: (b) Tl	k 90m da		
an effective date is listed, the date ote: If the date inserted in the ocument's effective date on the ocument's effective date of the ocument's effective date ocument's effective	7	· 2021		I a.m. on the earl		k 90m da		

Filing Fee: \$25.00