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(Requ	estor's Name)	<u> </u>
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PICK-UP	☐ WAIT	MAIL
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SECTION SECT

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COVER LETTER

Division of Corporations
SUBJECT: Florida Prime Real Estate Group, LCC 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:
SiZuia De Lour
Florida Prime Real Estate Group
1206 2434. St.
Orlando FL 32805 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
SiLvia De Lem at (407) 7/7 - 3958 Name of Person Afea Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\Bigcup \$30.00 Filing Fee & \$\Bigcup \$55.00 Filing Fee & \$\Bigcup \$60.00 Filing Fee. Certificate of Status \$\Bigcup \$ Certificate of Status \$\Bigcup \$ (additional copy is enclosed) \$\Bigcup \$ Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

TO:

Registration Section

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

(Name of the Limited Liability Compar (A Florida Limited L	Estate Group a	4.C
(A Florida Limited L	iability Company)	
The Articles of Organization for this Limited Liability Company	and assigned	
Florida document number <u>L/6 0000 87 280</u>		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	lity company here:	
The new name must be distinguishable and contain the words "Limited Liabili	ity Company," the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	1206 24H	St.
(Principal office address MUST BE A STREET ADDRESS)	1206 24th. Orlands FC	8
	32805	
Enter new mailing address, if applicable:	1206 244.	S#= = 11
(Mailing address MAY BE A POST OFFICE BOX)	1206 24th. Orlands Fl	- 1 5 5
	32805	
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here		nter the name of the nev
Name of New Registered Agent:	Silvia De Lem	
New Registered Office Address: /2	Silvia De Lem 06 244 St Enter Florida street address	•
	City Florid	18 <u>3 ∂ 80 5</u> Zip Code
Non-Boulet and Anna Company State and Boulet and Anna A		

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, <u>enter the title</u>, <u>name</u>, <u>and address of each person being added</u> or removed from our records:

or remo	veu from our records:		
	Manager = Authorized Member		

<u>Title</u>	<u>Name</u>	Address	Type of Action
			Remove
			Change
			□ Remove
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i effec <u>te:</u> If	e date, if other than tive date is listed, the date the date inserted in that's effective date on th	e must be specific a is block does no	and cannot be prior t meet the applic	to date of filing or more able statutory filing t		filing.) Pursuant to 60	
	rd specifies a dela 10th day after the			t an effective tin	🔫 at 12:01 a.	.m. on the earli	ier o
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		Signature of	a member or author	orized representative of	t a member	و ت 	•
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Page 3 of 3

Filing Fee: \$25.00