

L16000155458

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

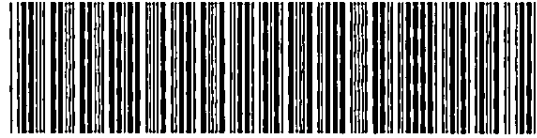
(Business Entity Name)

(Document Number)

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2019 MAR -4 PM 2:41
STATE OF MISSISSIPPI
FILING OFFICE - JEFFERSON

MAR 11 2019
C McNAIR

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Prime Housing Solutions LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

2018 MAR -4 PM 4:11
FILED
CLERK OF CIRCUIT COURT
IN AND FOR THE COUNTY OF
DADE FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 08/18/2016 and assigned
Florida document number L16000155458.

This amendment is submitted to amend the following:

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

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable: 915 Middle River Drive Suite 313
(Principal office address MUST BE A STREET ADDRESS) Fort Lauderdale, FL 33304

Enter new mailing address, if applicable: 915 Middle River Drive Suite 313
(Mailing address MAY BE A POST OFFICE BOX) Fort Lauderdale, FL 33304

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: _____
Enter Florida street address
_____, **Florida** _____
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> | <u>Address</u> | <u>Type of Action</u> |
|--------------|-------------|----------------|---------------------------------|
| _____ | _____ | _____ | <input type="checkbox"/> Add |
| | | _____ | <input type="checkbox"/> Remove |
| | | _____ | <input type="checkbox"/> Change |
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