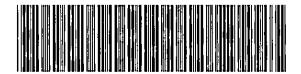
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Office Use Only



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COVER LETTER

	YNTON, LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
	ndence concerning this matter		
riease return air correspo	adence concerning this matter	to the following.	
	CHRISTOPHER PEREZ-	GURRI, ESQ	
		Name of Person	
	GPG LAW		
		Firm/Company	
	1326 SE 3RD AVENUE		
		Address	
	FORT LAUDERDALE, F	L 33316	
		City/State and Zip Code	
	JEANINE@GPGLAWFIR		
	E-mail address: (to be used for future annual report notifi	cation)
For further information c	oncerning this matter, please co	all;	
CHRISTOPHER PEREZ	Z-GURRI	954 533-5530	
Name o	f Person	at ()	Telephone Number
Enclosed is a check for th	ne following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed
	Certificate of Status		Certified Copy

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 OF

PRIME BOYNTON, LLC		
(<u>Name of the Limited Liability Co</u> (A Florida Limi	mpany as it now appears on our records.) ited Liability Company)	
the Articles of Organization for this Limited Liability Comp	any were filed on 6/15/17	and assigned
lorida document number L17000131188		
This amendment is submitted to amend the following:		
a. If amending name, enter the new name of the limited	liability company here:	
he new name must be distinguishable and contain the words "Limited I	.iability 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	<u> </u>	
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)	·	
3. If amending the registered agent and/or registered		nter the name of the
egistered agent and/or the new registered office address	<u>here</u> :	176
		ARA ARA
Name of New Registered Agent:		- 55.57 - Q
New Registered Office Address:		
	Enter Florida street address	7.5
	Floric	la 😤 😛 🐪
	City	Cip 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 = M $AMBR = A$	lanager Authorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	REED DEMOS	500 N. CONGRESS AVENUE,	
		A201	= Remove
		DELRAY BEACH, FL 33445	☐ Change
			Add
			Remove
			☐ Change
		· · · · · · · · · · · · · · · · · · ·	
			□ Remove
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			Remove
			Change
			Add
			☐ Remove
			Change
			☐ Remove
			☐ Change

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ive date, if other than the date of filing:	(optional)
ive date, if other than the date of filing: ective date is listed, the date must be specific and cannot be prior to date of filing or m If the date inserted in this block does not meet the applicable statutory filin	nore than 90 days after filing.) Pursuant to 6
ent's effective date on the Department of State's records.	g requirements, this date with not be r
cord specifies a delayed effective date, but not an effective t	time, at 12:01 a.m. on the ear
90th day after the record is filed.	
SDAN, 4000 - 2017	
DECEMBER 5 2017	

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00