## L186060 27755

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## COVER LETTER

ro:	Registration Sec Division of Corp				
2110.15		PRIME CONSTRUCTION. L	LC		
SUBJE	.CI:	Name of Lim	ited Liability Co	mpany	<del></del>
The end	closed Articles of	Amendment and fee(s) are sub	mitted for filin	<b>3</b> .	
Please	return all correspo	ndence concerning this matter	to the following	g.	
		CLEITON CARDOSO			
			Name of I	erson	<del></del>
		DOMINIUM CONSULTI			
			Firm/Con	<u> </u>	·
		6965 PIAZZA GRANDE A			
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		ORLANDO, FLORIDA -			
			City/State and	Zp Code	
		INFO@DOMINIUMCS.CO			
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ANA (	CLARA PIMENTA		407 at (	)	
	Name of	f Person	Arca	Code Daytir	ne Telephone Number
Enclose	ed is a check for th	ne following amount:			
<b>∃</b> S2:	5.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 F Certified (additional		☐ \$60.00 Fiting Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Registra Divisio P.O. Bo	ation Section of Corporations ox 6327 assee, FL 32314		STREET/COUR Registration Section Division of Corporal Clifton Building 2661 Executive Control Court of Court of Corporal Court of	orations Center Circle

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FLORIDA PRIME CONSTRUCTION, LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on 01/31/2018 and assigned Florida document number L18000027755 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 "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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 New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent and agree to dct 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. Thereby confirm that the limited liability

If Changing Registered Agent, Signature of New Registered Agent

company has been notified in writing of this change.

MGR = Manager AMBR = Authorized Member						
AMBR	HIURY GUTEMBERG FERREIRA					
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EBRUARY 5TH	2018				
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FEBRUARY 5TH  Alexandry 12 Signat	ure of a member or auth	orized represei	itative of a member		

Page 3 of 3

Filing Fee: \$25.00