

L19 000 207 857

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

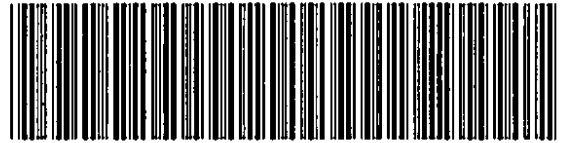
(Business Entity Name)

(Document Number)

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JAN 29 2020
S. YOUNG

FILED
19 DEC 30 AM 7:19
TALLAHASSEE, FLORIDA

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: AMERICAN PRIME INTERNATIONAL REALTY, LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fees(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

MARGARITA GALIANA

Name of Person

LOMAR GROUP, LLC

Firm/Company

6100 BLUE LAGOON DRIVE, SUITE 410

Address

MIAMI, FL 33126

City/State and Zip Code

jmenendez@americanprime.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MARGARITA GALIANA

305 267-9660
at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the 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)

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

FILED
19 DEC 30 AM 7:56
TALLAHASSEE, FLORIDA
U.S. DEPT. OF JUSTICE
and assigned

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

This amendment is submitted to amend the following:

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

(Principal office address MUST BE A STREET ADDRESS)

(Mailing address MAY BE A POST OFFICE BOX)

New Registered Office Address:

Enter Florida street address

Florida

('iŋ'

Zip Code

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>
MGR	WILLIAM A ZALAQUETT	6100 BLUE LAGOON DR., SUITE 410	<input type="checkbox"/> Add
		MIAMI, FL 33126	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	MAYDA J. GOMEZ	6100 BLUE LAGOON DR., SUITE 410	<input checked="" type="checkbox"/> Add
		MIAMI, FL 33126	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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[illegible]

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

2019

Signature of a member or authorized representative of a member

MARGARITA GALIANA

Typed or printed name of signee

Filing Fee: \$25.00