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	Registration Se Division of Cor						
SUBJEC	Prime Los z	Angeles LLC					
SUBJEC	-1:	Name of Limited Liability Company					
The encl	osed Articles of	Amendment and fee(s) are subr	nitted for filing.				
Please re	turn all correspo	indence concerning this matter t	to the following:				
		Rafael Bona					
		Prime Los Angeles LLC	Name of Person				
	Firm/Company 1694 Bayhill Dr.						
		Oldsmar, FL 34677	Address				
		bebotbona@gmail.com	City/State and Zip Code				
		E-mail address: (to	o be used for future annual report notif	ication)			
For furth	er information co	oncerning this matter, please ca	II:				
Rafael B	lona		727 439-2677				
	Name o	f Person	at () Area Code Daytime	Telephone Number			
Enclosed	l is a check for th	ne following amount:					
□ \$25.0	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)			

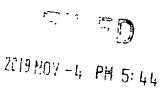
MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

STREET/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 Los Angeles 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 $\frac{08/27/2019}{}$ and assigned Florida document number _ L19000218456 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: (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 _. Florida _ City

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>	Name	Address	Type of Action
MGR	Neha Patel	3200 Parkwood Blvd Apt #313 Plano, TX 75093	= Add
			□ Remove
			Change
			□ Remove
			Change
			Add
			□ Remove
			Change
			
			Remove
			Change
			Add
			Remove
			Change
			□ Add
			□ Remove
			Change

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E. Effective date, if other than the (If an effective date is listed, the date in Note: If the date inserted in this I document's effective date on the	block does not meet the applicable	(optional) ate of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(statutory filing requirements, this date will not be listed as the
If the record specifies a delaye (b) The 90th day after the re		n effective time, at 12:01 a.m. on the earlier of:
October 30th	2019	
400		
	Signature of a member or authorize	d representative of a member
Zeff Rafael Bona		

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Typed or printed name of signee

Filing Fee: \$25.00