420 000040821

(Re	questor's Name)	,
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phon	ne #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Na	me)
(Do	cument Number)
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	

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COVER LETTER

Division of Corp	orations		
SUBJECT: PRIM	L Garage J Kame of Limi	Down Repair Li	lc
The enclosed Articles of A	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspor	dence concerning this matter	to the following:	
		Marya / Name of Person Name of Person Nage Door Rep	
	215 Gentle	Breeze Dr Min	rneola FE 34715
	Minheala	F(34715 City/State and Zip Code Xahoo: Com to be used for future annual report noti	
	YALIV 3778 (E-mail address: (i	P Yahoo . Com to be used for future annual report noti	fication)
For further information co	ncerning this matter, please ca	all:	
Yahiv Am	oyal Person	at (<u>407</u>) <u>747</u> Area Code Daytim	-/ODO e Telephone Number
Enclosed is a check for the	e 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)

TO:

Registration Section

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Prime Garage Dow Repay LLc 25.25 25 AH 10: 29

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

(A Florida Limited Liability Company)

(A Florida Limited	(Liability Company)	,			
The Articles of Organization for this Limited Liability Compan	y were filed on	14 / 2020 and assigned			
Florida document number <u>L2000040821</u>					
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limited lia	bility company hero	<u>2</u> :			
The new name must be distinguishable and contain the words "Limited Liab	oility Company," the desi	ignation "LLC" or the abbreviation "L.L.C."			
Enter new principal offices address, if applicable:					
(Principal office address MUST BE A STREET ADDRESS)					
D. A					
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 rec	ords, enter the name of the new registered			
agent and/or the new registered office address here:					
Name of New Registered Agent:	44.				
New Registered Office Address:	Enter Florid	a street address			
		, Florida			
	City	, Florida Zip Code			
New Registered Agent's Signature, if changing Registered Agen	<u>t:</u>				
I hereby accept the appointment as registered agent and ag		pacity. I further agree to comply with the			

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>	Address	Type of Action
AMOR	Yariv Amoyal	9753 SIBLEY CIRCLE Orlando Fl 32836	EAdd
		orlando Fl 32836	□Remove
			□ Change
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i an effe <u>Note:</u> I	ye date, if other than the date of filing:
	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
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