

L200000086653

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

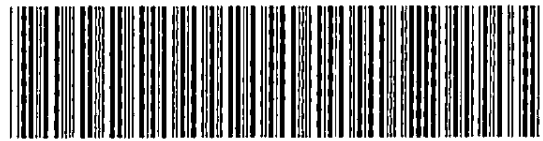
Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Incorrect Form
Registered Agent
Signature
Name Unavailable

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01/13/24--01/22/24

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2024 APR 15 PM 2:40
FILE

AB

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ELITE PERMITS LLC

Name of Limited Liability Company

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

Please return all correspondence concerning this matter to the following:

NOEMI WAGNITZ

Name of Person

ELITE PERMITS LLC

Firm/Company

2670 HORSESHOE DR N SUITE 208

Address

NAPLES, FL 34104

City/State and Zip Code

TGUST@ELITEPERMITS.COM | CC: NWAGNITZ@ELITEPERMITS.COM

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

For further information concerning this matter, please call:

NOEMI WAGNITZ

239 280-0570
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

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

ELITE PERMITS LLC

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

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The Articles of Organization for this Limited Liability Company were filed on MAR 20, 2020 and assigned
Florida document number L20000086653.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

PRIMA SOLUTIONS LLC

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 Zip 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

MGR = Manager
AMBR = Authorized Member

AMBR = Authorized Member

[illegible]

This image shows a single sheet of white paper with horizontal blue or grey ruling lines. The lines are evenly spaced and run across the width of the page. There is no handwriting or other markings on the paper.

Effective date, if other than the date of filing: 01/01/2024 (optional)
(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)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated JANUARY 11

2024

Signature of a member or authorized representative of a member

TATIANA GUST

Typed or printed name of signee

Filing Fee: \$25.00



ELITE PERMITS

NAPLES | 2670 HORSESHOE DR SUITE 205, NAPLES, FL 34104 | 239-280-0570
LEE | 2150 EDISON AVE SUITE A, FT MYERS, FL 33901 | 239-280-0570
SARASOTA | 2831 RINGLING BLVD SUITE A103, SARASOTA, FL 34237 | 941-225-8898

February 26, 2024

FLORIDA DIVISION OF CORPORATIONS
POB 6327
Tallahassee, FL 32314

ATTENTION: ANISSA BUTLER, Regulatory Specialist II
Registration Section

RE: Letter No. 124A00002647
ELITE PERMITS LLC
REF NO. L20000086653

Please find the enclosed revised amendment form to amend Elite Permits LLC to Prima Solutions LLC.

The LLC Amendment form shows a cost of \$25.00. Since we have already sent you Check 1030 for \$35.00 with our original submission, we understand that check payment will be applied to this one. We have enclosed a copy for your reference.

Thank you for your assistance.

NOEMI WAGNITZ
nwagnitz@elitepermits.com
239-280-0570



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 7, 2024

NOEMI WAGNITZ
2670 HORSESHOES DR N
SUITE 208
NAPLES, FL 34104

SUBJECT: ELITE PERMITS LLC
Ref. Number: L20000086653

We have received your document for ELITE PERMITS LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a FLORIDA PROFIT CORPORATION, but your entity is a FLORIDA LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s).

We are enclosing the proper form(s) with instructions for your convenience.

The registered agent must sign accepting the designation.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

The document number of the name conflict is L22000395483.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Anissa Butler
Regulatory Specialist II

Letter Number: 124A00002647



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 8, 2024

NOEMI WAGNITZ
2670 HORSESHOE DR N.
SUITE 208
NAPLES, FL 34104

SUBJECT: ELITE PERMITS LLC
Ref. Number: L20000086653

We have received your document for ELITE PERMITS LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Anissa Butler
Regulatory Specialist II

Letter Number: 724A00007456