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(Red	uestor's Name)	
(Add	iress)	
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(City	/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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(Doc	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to F	iling Officer	
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A. RIVERS

NOV 0 2 2021

COVER LETTER

Registration Section Division of Corporations

TO:

SUBJECT: PRIMO SOU		ited Liability Company	
The enclosed Articles of A	amendment and fee(s) are sub	mitted for filing.	
Please return all correspon	dence concerning this matter	to the following:	
	TONY JONES	Name of Person	
	CITRINE ACCOUNTING		
		Firm/Company	
	81 NW 45TH CT	Address	
	OAKLAND PARK, FL 33	309 City/State and Zip Code	<u></u>
	TONY@CITRINEACCOU E-mail address: (NTING.COM to be used for future annual report not	ification)
For further information co	neerning this matter, please ca	all:	
TONY JONES Name of	Person	at (954) 934-3718 Daytin	ne Telephone Number
Enclosed is a check for the	following amount:		
■ \$25.00 Filing Fee	S30.00 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)
<u>Mailing Address</u> Registration Se	-	<u>Street Address:</u> Registration Se	ection
Division of Co	rporations	Division of Cor	rporations
P.O. Box 6327 Tallahassee, F		The Centre of T	Fallahassee be Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PRIMO SOUTH FLORIDA INVESTMENT LLO

(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 I	iability Company	were filed on <u>04/01/202</u>		and assigned
Florida document number <u>L21000152459</u>				
This amendment is submitted to amend the fol	lowing:			
A. If amending name, enter the new name of	of the limited liab	oility company here:		
The new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the designati	on "LLC" or the	abbreviation "E.L.C."
Enter new principal offices address, if appli-	cable:	2124 NE 9TH AVE		
(Principal office address MUST BE A STREE	ET ADDRESS)	WILTON MANORS,	FL 33305	
Enter new mailing address, if applicable:		2124 NE 9TH AVE		
(Mailing address MAY BE A POST OFFICE I	BOX)	WILTON MANORS,	FL 33305	
B. If amending the registered agent and/or	registered office :	address on our records	enter the na	me of the new registered
agent and/or the new registered office addre		address on our records	<u> </u>	7.1 1.2
Name of New Registered Agent:	DIEGO SCAR	ABAGGIO		
New Registered Office Address:	2124 NE 9TH .			
		Enter Florida stre	et address	
	WILTON MAN		Florida 🗓	
		Cuy		Zip Code
New Registered Agent's Signature, if changing	Registered Agent:			
I hereby accept the appointment as register	ed agent and agr	ee to act in this capaci	ty. I further a	gree 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
			□Add
			□ Remove
			□ Change
			□Remove
			Change
			□ Add
		***************************************	□Remove
		,	🗀 Change
		□Remove	
			□ Change
		□Remove	
			□ Change
			□Remove
			□ Change

CI	lange of Business address
<u>CI</u>	HANGE OF REGISTERED AGENT ADDRESS
_	
_	
_	
ectiv	e date, if other than the date of filing: (optional)
<u>e:</u> lí	tive 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 605.020 the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as it's effective date on the Department of State's records.
cord s filed	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 f.
ed S	EPTEMBER 19TH . 2021 .
<u> </u>	Signature of a member or authorized representative of a member
	Signature of a member of authorized representative of a member