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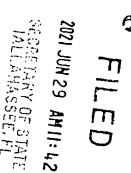
(R	equestor's Name)	
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PICK-UP	MAIT	MAIL
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Certified Copies	Certificates o	of Status
Special Instructions to	Filing Officer:	
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C Kinsey

COVER LETTER

TO:	Registration Sec Division of Corp		٩	
SUBJE	Primavin Se	rvices, LLC		*
SODJE	CI. 7	Name of Limi	ited Liability Company	
The enc	closed Articles of A	Amendment and fee(s) are sub-	mitted for filing.	
Please r	eturn all correspor	ndence concerning this matter	to the following:	
		Edvaldo Soares Pereira		
			Name of Person	
		Primavin Services LLC		
			Firm/Company	
		4343 Purdy Lane		
4343 Purdy Lane Address				
		West Palm Beach, FL 3340	06	
			City/State and Zip Code	
		pereirasingers@hotmail.com	n to be used for future annual report notif	ication)
For furt	her information co	oncerning this matter, please ca		
	EDVALO Name of	S. PEREIRA Person	at (<u>56 </u>) <u>315-89</u> Area Code Daytimo	240 e Telephone Number
Enclose	ed is a check for the	e following amount:		
\$Q.\$25	5.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	S55.00 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

(Name of the Limited Liability Com	and as it now appears on our rec	ords)
(Name of the Limited Liability Com (A Florida Limited	Liability Company)	orus.)
The Articles of Organization for this Limited Liability Companification for the Liability Companification f	y were filed on 05/11/2021	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	bility company here:	
The new name must be distinguishable and contain the words "Limited Lia	bility Company," the designation "I	.LC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		<u>~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ </u>
		2021
Enter new mailing address, if applicable:		第26
(Mailing address MAY BE A POST OFFICE BOX)		တိုင္က 🛌 🔟
		E o E
		# 2
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	e address on our records, <u>ent</u>	• •
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street ado	lress
		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 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
MGR	Edvaldo Soares Pereira	4343 Purdy Lane	= Add
		West Palm Beach, FL 33406	□ Remove
			Change
			□Add
			Remove
			☐ Change
			□ Add
			Remove
		-	□ Add
			□Remove
			Change
			_ _ _ _ _ _ _ _
			□Remove
			□ Add
			Remove
			□Change

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an effective dat lote: If the da	if other than the is listed, the date mus e inserted in this bl ctive date on the D	t be specific and ock does not m	cannot be prior eet the applic	to date of filing o able statutory fi	r more than 90 day		
record specifi	s a delayed effectiv	e date, but not	an effective ti	me, at 12:01 a.t	n. on the earlier	of: (b) The 90t	h day after the
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)ated	1117	JE 95	9 <u>291</u>	,			
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