Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Acdount Name : M. BURR KEIM COMPANY

Acdount Number : I19990000242 Phone : (215)563-8113

Fax Number : (215)977-9386

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: James@RMontgomery-Law.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN PRIMROSE LAKE CIRCLE REAL ESTATE HOLDING LLC

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A. LUNT

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=ax. 12159779386

Fax. (850) 617-6383

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



PRIMROSE LAKE GIRCLE REAL ESTATE HOLDING LLC

ı	INCER REAL ESTATE HOLDING FILC
(<u>Nar</u>	ne of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)
The Articles of Organization for th Florida document number $\frac{1.230000}{1.00000000000000000000000000000000$	is Limited Liability Company were filed on January 04, 2023 and assigned
This amendment is submitted to a	pend the following:
A. If amending name, enter the	new name of the limited liability company here:
The new name must be distinguishable ar	ad contain the words "Lumited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices addr	ess, if applicable:
(Principal office address MUST F	E A STREET ADDRESS)
Enter new mailing address, if ap	plicable:
(Mailing address MAY BE A POS	T OFFICE BOX)
B. If amending the registered ag agent and/or the new registered	ent and/or registered office address on our records, <u>enter the name of the new registered</u> <u>office address here</u> :
Name of New Registered	Agent:
New Registered Office A	
	Enter Florida street address
	, Florida
New Registered Agent's Signature,	·
I hereby accept the appointment provisions of all statutes relative accept the obligations of my pos	as registered agent and agree to act in this capacity. I further agree to comply with the to the proper and complete performance of my duties, and I am familiar with and ition as registered agent as provided for in Chapter 605. F.S. Or, if this document is unge in the registered office address. I hereby confirm that the limited liability
	If Changing Registered Agent, Signature of New Registered Agent

om: M. BURR KE	'M CO Fax: 12159779386 7	o. Fax: (850) 617-6383	Page: 3 of 4 01/11/2023 4:19 PM	
If amendir or remove	ng Authorized Person(s) auth d from our records:	orized to manage, enter the title, name, and	l address of each person being ad	
MGR = 3	Manager Authorized Member			
Title	<u>Name</u>	Address	Type of Action	
MGR	Kasey Cowser	12415 Hitching Street	≣ ∧dd	
		Odessa, Florida 33556	Remove	
			□Change	
			□Add	
		4	Remove	
			□Change	
· -			□Add	
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			Remove	
			□Change	
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			Change	
			□Add	
			Remove	
			□ Change	

D. If am	ending any other infor	mation, enter change(s) here: Attach additional sheets, if necessary.
		nation, enter change(s) here: (Attach additional sheets, if necessary.) (1900)
		- AH11: 27
	<u> </u>	
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Note:	If the date inserted in this	he date of filing:
If the recorrecord is fi		live date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated	January 10	2023
		James Burnett Signature of a member or authorized representative of a member
		Signature of a member or authorized representative of a member
	James Burnett: Autho	ized Representative
		Typed or printed name of signee