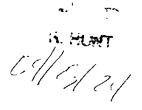
## L24000032523

| (Requestor's Name)                      |
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| PICK-UP WAIT MAIL                       |
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| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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DATE:

04/29/2024

NAME: ASSET PRIME REAL ESTATE FUND LLC

TYPE OF FILING: AMENDMENT

COST: 25.00

RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA00000015

AUTHORIZATION: ABBIE/PAUL HODGE

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| Asset Prime Real Estate Fund LLC   |   |                                       |
|--|---|---------------------------------------|
| ( <u>Name of the Limited Liabili</u><br>(A Florida   | ty Company as it now appears on our red<br>a Limited Liability Company) | cords.)                               |
| he Articles of Organization for this Limited Liability C   | Company were filed on January 16, 20                                    | and assigned                          |
| lorida document number L24000032523  | <u>_</u> .  |                                       |
| his amendment is submitted to amend the following:   |   |                                       |
| . If amending name, enter the new name of the limit  | ited liability company here:  |                                       |
| he new name must be distinguishable and contain the words "Lim   | ited Liability Company," the designation "                              | LLC" or the abbreviation "L.L.C."     |
| nter new principal offices address, if applicable:   |   | · · · · · · · · · · · · · · · · · · · |
| Principal office address MUST BE A STREET ADDR   | RESS)   | <u> </u>                              |
|  | - 12-12   | 3 3                                   |
|  |   | SSEE S                                |
| nter new mailing address, if applicable:   |   | 1                                     |
| Mailing address MAY BE A POST OFFICE BOX)  |   | FL 53                                 |
|  |   |                                       |
| . If amending the registered agent and/or registered gent and/or the new registered office address here: | d office address on our records, <u>en</u>                              | ter the name of the new regist        |
| Name of New Registered Agent:  |   |                                       |
| New Registered Office Address:   |   |                                       |
|  | Enter Florida street ad   | dress                                 |
|  |   | 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

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          | Shawn Brown | 2665 SOUTH BAYSHORE DRIVE          | 🗀 Add          |
|              |             | COCONUT GROVE, MIAMI, FL. 33133 US | ≅Remove        |
|              |             |                                    | □Change        |
| MGR          | Shaun Brown | 2665 SOUTH BAYSHORE DRIVE          | <b>=</b> Add   |
|              |             | COCONUT GROVE, MIAMI, FL. 33133 US | □Remove        |
|              |             | <del></del>                        | □ Change       |
|              |             |                                    | □Add           |
|              |             |                                    | ::<br>☐Remove  |
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|              |             |                                    | □Remove        |
|              |             | □Change                            |                |
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|              |             |                                    | □Remove        |
|              |             |                                    | □Change        |

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| fective date, if other than the neffective date is listed, the date mote: If the date inserted in this becament's effective date on the I | ist be specific ai<br>lock does not | nd cannot be price meet the appli | or to date of filicable statutor | ng or more than | 90 days after filing | .) Pursua | ant to 605.02<br>of be listed |
| ecord specifies a delayed effecti<br>is filed.  | ve date, but no                     | ot an effective                   | time, at 12:01                   | a.m. on the e   | arlier of: (b) T     | he 90th   | day after th                  |
| ted   |                                     | 2024                              |                                  |                 |                      |           |                               |
| ted April 26 Bruce E  | Met                                 | twen                              |                                  |                 |                      |           |                               |
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