L24 0000 33564

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COVER LETTER

TO:

Tallahassee, FL 32314

PRIMETE SUBJECT:	ME SECURITY SOLUTIONS	LLC		
SUBJECT:	Name of Lim	ited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	SHANEKA A FORD			
		Name of Person		
	Name of Limited Liability Company anclosed Articles of Amendment and fee(s) are submitted for filing. are return all correspondence concerning this matter to the following: SHANEKA A FORD			
	2020 ELDRIDGE PARKWAY APT 1104 Address HOUSTON TEXAS 77077			
	HOUSTON TEXAS 7707	7		
	CHANGE ADROVATIONA	·		
	-		dication)	
For further information of	concerning this matter, please c	all:		
SHANEKA A FORD		et (
Name (of Person	Area Code Daytim	e Telephone Number	
Enclosed is a check for t	he following amount:			
■ \$25.00 Filing Fee		Certified Copy	Certificate of Status & Certified Copy	
			ction	
Division of C		Division of Cor		
P.O. Box 632		The Centre of T		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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PRIMETIME SECURITY SOLUTIONS LLC

(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 Liability Company of Elorida document number <u>L24000033564</u>	were filed on 01/17/2024	and assigned	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabi	lity company here:		
The new name must be distinguishable and contain the words "Limited Liabili	ty 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 as agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address:	ddress on our records, <u>enter the</u>	name of the new registered	
	Enter Florida street address		
	, Florida		
Non-Basis and American Services of Services in the Services of Ser	City	Zip Code	
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent and agre provisions of all statutes relative to the proper and complete p accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office of company has been notified in writing of this change.	performance of my duties, and l rovided for in Chapter 605, F.S	I am familiar with and i. Or, if this document is	

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>	<u>Address</u>	Type of Action
MGR	SHANEKA A FORD	2020 ELDRIDGE PARKWAY APT 1104	□Add
		HOUSTON TEXAS 77077	≣Remove
			□Change
			□Add
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Effect	ive date, if other than the date	e of filing:			(option	al)	
lf an eft Noter	ective date is listed, the date must be salf the date inserted in this block of	pecific and cannot be	prior to date of	filing or more tha	m 90 days after fi	ling.) Pursuant to 60.	5.0207
	ent's effective date on the Depart			atory ming requ	nremeats, this c	iate will not be its	ted as t
e recor	d specifies a delayed effective dat	e but not an effect	ive time at 1	2:01 am on the	earlier of: th	The 90th day aft.	er the
rd is fi	led.	or wat the tall effect	ire iiiie. ui 1.	2.01 a.m. on the	carrier on (0)	the four day are	.i tiic
Dated	JANUARY 26	2024					
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Dated							
Dated		Thanka 70	red	81	tro a	707al	

Filing Fee: \$25.00