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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : INCFILE.COM LLC Account Number : I20220000070 Phone : (888)462-3453 Fax Number : (877)919-2613

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

EFILE1234@INCFILE.COM Email Address:\_\_\_

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN PRIME TERRAIN, LLC

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## **COVER LETTER** TO: Registration Section Division of Corporations PRIME TERRAIN, LLC SUBJECT: Name of Limited Liability Company The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: LOVETTE DOBSON Name of Person Firm/Company 17350 STATE HWY 249 STE 220 Address HOUSTON, TX 77064 City/State and Zip Code EFILE1234@INCFILE.COM F-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: LOVETTE DOBSON Daytime Telephone Number Name of Person Enclosed is a check for the following amount: ☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee. \$25.00 Filing Fee ☐ \$30.00 Filing Fee & Certificate of Status & Certificate of Status Certified Copy Certified Copy (additional copy is enclosed) (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

PRIME	TERRAIN, LLC	
(Name of the Limited Liability Com (A Florida Limite	pany as it now appears on our record Liability Company)	rds.)
The Articles of Organization for this Limited Liability Compar	ny were filed on 02/01/2024	and assigned
Florida document number 1.24000059931		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	ability company here:	
PRIME TERRAIN USA LLC		
The new name must be distinguishable and contain the words "Limited Lia	ability Company," the designation "LL	.C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		267
		j D
Enter new mailing address, if applicable:		*
(Mailing address MAY BE A POST OFFICE BOX)		: : - :
		ć
		<u></u>
B. If amending the registered agent and/or registered offic agent and/or the new registered office address here:	e address on our records, <u>ente</u>	r the name of the new registere
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street addr	CAN
		Torida
	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 Ne	w Registered Agent

4/24/2024 11:34:20 CGT

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
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ective date, if other than the effective date is listed, the date made in this term of the date inserted in this sument's effective date on the	block does not meet the app	licable statutory filing	(optiona re than 90 days after filin requirements, this da	l) ng.) Pursuant to 605.020 te will not be listed a
cord specifies a delayed effect s filed.	ive date, but not an effective	time, at 12:01 a.m. or	the earlier of: (b)	The 90th day after the
April 23	2024	·		
	·	21. 1. A .	M) .	
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	Signature of a member or au	Truck UNU	f a nember	

Filing Fee: \$25.00