## 1990000000099

	(Requestor's Name)	
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	(City/State/Zip/Phone #)	
PICK-U	P WAIT	MÁIL
, ,	(Business Entity Name)	·
-		
	(Document Number)	
Certified Copies	Certificates of	Status
Special Instruction	is to Filing Officer:	
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Office Use Only



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D. BRUCE
AUG 0 9 2010
EXAMINER

## COVER LETTER .

SUBJECT:	P	rime (	- -	e L <u>.</u> L.C		
SUBJECT:	Name of					<u> </u>
Dear Sir or Madam:		· .		,		
The enclosed Registered Agent/	Registered	Office C	Change	and fee(s	s) are submitte	d for filing.
Please return all correspondence	e concerning	g this m	atter to	the follo	wing:	
Eric W				_		
Name of Per	rson .				•	
						₩.
Wolz Corporate		•		<del></del>		
·	·					
36 South 18th Av	enue. Suite	еĎ				ASSE VARY
Address	<del></del>	<del></del>		_		Annual Property and Property an
•					•	AN D:
Brighton, C				_		
City/State and Z	ip Code		•			<b>**</b>
•				\$	•	
E-mail address: (to be used for fum	re annual report	notificatio	n)			±
For further information concern	ing this ma	tter, ple	ase call			
						•
Eric Wolz		at'(	303	_):	655-96	59
: Name of Person				Aren Code	& Daytime Telepho	one Number
STREET/COURIER AD	DRESS:		MA	ILING A	DDRESS:	
Registration Section		Registration Section				
Division of Corporations Clifton Building		Division of Corporations				
2661 Executive Center Ci	role:	P.O. Box 6327 Tallahassee, Florida 32314				
Tallahassee, Florida 3230			1411	minosom,	Thus united a	. •
	-					
Enclosed is a check for	r the follow	ing amo	ount:	,	• • •	•

INHS18 (5/08)

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

4 32 44 4 4 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Dalas Osias III O			
1. Name of the limited liability company:	Prime Garage L.L.C.			
2. (a) Principal office address of limited liability company	y: c/o AFI USA			
(Note: MUST BE STREET ADDRESS)	229 W. 43rd Street, 10th Floor New York, NY 10036			
(b) Mailing address of limited liability company:	c/o AFI USA			
(Note: MAY BE POST OFFICE BOX)	229 W. 43rd Street, 10th Floor New York, NY 10036			
04/14/1999	L9900002098			
3. Date of filing/registration in Florida	4. Document number			
5. (a) Registered Agent and Registered Office shown on	the records of the Florida Dept. of State:			
Registered Agent:	Tzindler, Maya			
Registered Office Address:	3050 Biscayne Blvd. Suite 700 S Miaml, FL 33137 US			
	MIBITIL FL 33/3/ 05 5 5			
•	\$3.0 <b>6</b>			
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NE</u>	W Registered Office address			
NEW Registered Agent:	Incorp Services, Inc. SS 5			
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	17888 67th Court North			
102004 221 4 20412/102/1021 /102/1000/	Loxahatchee ,FL33470			
If the limited liability company is not organized under the confirmed that after the change or changes are made, the F and the business office of the registered agent will be identiability company, it is hereby confirmed that the change(s of the members of the limited liability company or as other or the operating agreement of the limited liability company.  Signature of a member or authorized representative of a member	lorida street address of the registered office			
Tamir Kazaz, Authorized Representative Printed or typed name of signes				
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the prana I am familiar with and accept the obligations of my package of the continuous of the provision of the pr	ngree to act in this capacity. I further agree to oper and complete performance of my duties, osition as registered agent as provided for in crely reflect a change in the registered office y has been notified in writing of this change.			
Signature of Registered Agent Eric Wolz, Assistant Secretary  Division of Corporations, P.O. Box 63	327. Tallahassee. FL 32314			

FILING FEE: \$25.00