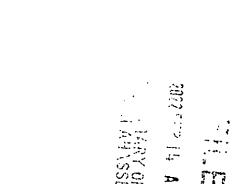
M22000011452

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



100393727911



8EP 1 4 2022 R. HUNT

,	' COVER L	ETTER			
TO: Registration Section Division of Corporations			•	•	
PRIMAS PROPERTIES, LLC SUBJECT:					
	Name of Limited Lia	ibility Company			
Dear Sir or Madam:					
The enclosed Statement of Correction and fee	(s) are submitted for filing	ng.			
Please return all correspondence concerning the	his matter to the following	ng:			
Lisa Sensabaugh				35	
Name of Person		_		223	
NCH REGISTERED AGENT			43	<u></u> :	٠
Firm/Company		_	35		-
4730 S FORT APACHE RD STE 300			OF S	A	i C
Address		_	₽ <u>Z</u>	2: 00	
LAS VEGAS, NV 89147			171	_	
City/State and Zip Code		_			
Jocelyne.Desaulniers@gmail.com					
E-mail address: (to be used for future and	nual report notification)	-			
For further information concerning this matter,	, please call:				
Jocelyne Desaulniers	984 at (284-4484			
Name of Person	Area Code	Daytime Telephone Number			
Mailing Address:		Street Address:			
Registration Section		Registration Section			
Division of Corporations P.O. Box 6327		Division of Corporations			
Tallahassee, FL 32314		The Centre of Tallahassee			
1 attailassee, FL 32314		2415 N. Monroe Street, Su Tallahassee, FL 32303	ite 810		
Enclosed is a check for the following amoun	t:				
□S25 Filing Fee \$\forall \square \square \square \square \square \square \square \qquad \qquad	□\$55 Filing Fee &	S60 Filing Fee.			
S25 Filing Fee & Certificate of State	us Certified Copy	Certificate of Status &			

STATEMENT OF CORRECTION FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

Pursuant to section 605.0209, F.S., this document is being submitted to correct a previously filed document. FIRST: The name of the limited liability company is: PRIMAS PROPERTIES, LLC SECOND: The Florida Document number of the limited liability company is: Document to be corrected is: Foreign LLC Qualification THIRD: (CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT Ø Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows: 2nd manager listed in error, please remove manager name - Lucette Boulet There is only one manager, correct name is: Jocelyne Desaulniers <u>OR</u> **2**. Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows: OR نا The electronic transmission of the record was defective. Signature of new registered agent, if applicable :(NOTE: if correcting the registered agent, the new registered agent must sign 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 Filing Fee: \$25.00 Certified Copy:

\$30.00 (optional)