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(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ry/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Prime at th	e Esmeralda II,	Inc.
D000007477		
DOCUMENT NUMBER: PUBUUU0/1//		
The enclosed Articles of Amendment and fee are su	bmitted for filing.	
Please return all correspondence concerning this mat	ter to the following:	
Jose Menendez		
	Name of Contact Perso	n
American Prime		
	Firm/ Company	
5775 Blue Lagoo	n Drive, Suite	350
	Address	
Miami, FL 33126		
	City/ State and Zip Cod	e
jmenendez@americ	anprimegroup.d	com
•	ed for future annual report	
For further information concerning this matter, pleas	e call:	
Jose Menendez	at (305	267-9660
Name of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for the following amount made p	payable to the Florida Depa	artment of State:
■ \$35 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Ameno Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle
	Tallah	assee, FL 32301

Articles of Amendment to Articles of Incorporation of

rently filed with the	Florida Dept. of State) (if known)	_
· · · · · · · · · · · · · · · · · · ·		_
mber of Corporation	(if known)	_
mber of Corporation	(if known)	
, Florida Statutes, thi	is Florida Profit Corporation adopts the follow	/ing amendment(
of the corporation:		
		The new
1 "Corp," "Inc," or	"Co". A professional corporation name mus	
B. Enter new principal office address, if applicable:		
	Suite 350	_
	Miami, FL 33126	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		1 00 £,44,7
		· 3 🝇
	Miami, FL 33126	- 3 - 3 - 2 - 2 - (二)
		e, . ·
775 Blue Lac	noon Dr., Suite 350	
ami	, Florida 33126	
	, 1 101144	
	the word "corporation: the word "corporation: " "Corp." "Inc." or " or the abbreviation plicable: ET ADDRESS) e: ICE BOX) registered office address 775 Blue Lag	the word "corporation." "company," or "incorporated" or the a "Corp," "Inc," or "Co". A professional corporation name must or the abbreviation "P.A." plicable: ET ADDRESS) Suite 350 Miami, FL 33126 Suite 350 Miami, FL 33126 registered office address in Florida, enter the name of the distered office address: 75 Blue Lagoon Dr., Suite 350 (Florida street address)

Signature of New Registered Agent, if changing

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>PT</u>	John Do	<u>oc</u>	
X Remove	$\underline{\mathbf{V}}$	Mike Jo	ones	
X Add	<u>sv</u>	Sally Si	mith_	
Type of Action (Check One)	<u>Title</u>		Name	Address
1) Change	PRE	S	Margarita Galiana	5775 Blue Lagoon Dr.
Add				Suite 350
Remove				Miami, FL 33126
2) Change		_		
Add				
Remove				
3) Change		_		
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change		_		
Add				
Remove				

f amending or adding additional Artic Attach additional sheets, if necessary).	(Be specific)
-	
	
	-
· · · · · ·	
an amendment provides for an exchiprovisions for implementing the amer	nange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	

The date of each amendment(s) a date this document was signed.	doption:	, if other than the
_	tober 1, 2013	
meetive date <u>is applicable</u> .	(no more than 90 days after amendment file date)	_
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.	
	proved by the shareholders through voting groups. The following statement reach voting group entitled to vote separately on the amendment(s):	
"The number of votes case	for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
The amendment(s) was/were ad action was not required.	opted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were ad	opted by the incorporators without shareholder action and shareholder	
action was not required.		
Dated October	7, 2013	
Signature / / /	aganta Calque	
	prector president or other officer - if directors or officers have not been	_
	d, by an incorporator — if in the hands of a receiver, trustee, or other court need fiduciary) by that fiduciary)	
	Margarita Galiana	
	(Typed or printed name of person signing)	_
	President	
	(Title of person signing)	_