I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

MANAGER

SIGNATURE: MARK A GOOD

Electronic Signature of Signing Authorized Person(s) Detail

Electronic Signature of Registered Agent

Authorized Person(s) Detail :

DOCUMENT# L08000113547

10030 EW PAPPY RD

ST JOHNS, FL 32259

GOOD, MARK A 10030 EW PAPPY RD

SIGNATURE:

2117

Current Mailing Address: 2406 GOLFVIEW DR

FEI Number: 26-3914521

FLEMING ISLAND, FL 32003 US

Name and Address of Current Registered Agent:

2117

Current Principal Place of Business:

Entity Name: PRIME PROPERTIES OF NE FLORIDA, LLC

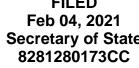
FILED Feb 04, 2021 Secretary of State 8281280173CC

Certificate of Status Desired: Yes

ST JOHNS, FL 32259 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

Title MGR GOOD, MARK A Name 10030 EW PAPPY RD. SUITE 2117 Address City-State-Zip: ST JOHNS FL 32259



02/04/2021 Date

Date