2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000002286

Entity Name: PRIME PROPERTIES FLORIDA, LLC

Current Principal Place of Business:

4415 FLORIDA NATL. DR. 104 LAKELAND, FL., FL 33813

Current Mailing Address:

4415 FLORIDA NATL. DR. 104 LAKELAND, FL., FL 33813 US

FEI Number: 47-2684051

Name and Address of Current Registered Agent:

SLIND, KAREN 2605 EWELL RD LAKELAND, FL., FL 33811 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.

| SIGNATURE | KAREN SLIND | | | 02/02/2017 |
|-------------------------------|--|-----------------|------------------------|------------|
| | Electronic Signature of Registered Agent | | | Date |
| Authorized Person(s) Detail : | | | | |
| Title | MGR | Title | MGR | |
| Name | CORNETT, JOE | Name | SLIND, MICHAEL | |
| Address | 4415 FLORIDA NATIONAL DR. | Address | 2605 EWELL RD | |
| City-State-Zip: | 103 SUITE 2 LAKELAND FL 33806 | City-State-Zip: | LAKELAND, FL. FL 33811 | |
| | | | | |
| Title | MGR | | | |
| Name | SLIND, KAREN | | | |
| Address | 2605 EWELL RD | | | |
| City-State-Zip: | LAKELAND, FL. FL 33811 | | | |

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.

MGR

SIGNATURE: JOE CORNETT

Electronic Signature of Signing Authorized Person(s) Detail

FILED Feb 02, 2017 Secretary of State CC0372742850

Certificate of Status Desired: No

02/02/2017 Date