

Division of Corporations

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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

L0900034338

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Division of Corporations
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**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
PLATINUM ADVISOR STRATEGIES, LLC**

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Corporate Filing Menu

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DIVISION OF CORPORATIONS
FAX UNIT

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

PLATINUM ADVISOR STRATEGIES, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 04/09/2009 and assigned Florida document number 1.09000034338

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

PASM, LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

910 Old Camp Rd

Bldg 90

The Villages, FL 32162

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

910 Old Camp Rd

Bldg 90

The Villages, FL 32162

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

City, Florida Zip Code

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 of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	☐ Add
_____	_____	_____	☐ Remove
_____	_____	_____	☐ Change
_____	_____	_____	☐ Add
_____	_____	_____	☐ Remove
_____	_____	_____	☐ Change
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_____	_____	_____	☐ Remove
_____	_____	_____	☐ Change

[illegible]

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated 16 July 2018

 Signature of a member or authorized representative of a member
 Thomas M. Cross, Managing Member

 Typed or printed name of Signer