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(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
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JUL - 6 2018

COVER LETTER

Division of Co			
Golden So	ource LLC		
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles of	'Amendment and fee(s) are sub	omitted for filing.	
Please return all correspondence	ondence concerning this matter	to the following:	
	Herb Santiago		
	·	Name of Person	
	Golden Source LLC		
		Firm/Company	
	480 NW 76th Avenue Suit	e 304	
		Address	
	Margate, Florida 33063		
	herbsantiago@hotmail.com	City/State and Zip Code	
	E-mail address: (to be used for future annual report notif	ication)
For further information of	concerning this matter, please c	all:	
Herb Santiago		754 423-8171 at ()	
Name	of Person	Area Code Daytime	: Telephone Number
Enclosed is a check for t	he following amount:		
\$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

18 JUL-5 PH 3:03

Golden Source 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	9, 2018 and assigned
Florida document number		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The Affiliate LLC		
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designati	on "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	480 NW 76th Avenue 3	Suite 304
(Principal office address MUST BE A STREET ADDRESS)	Margate, Florida 3306	3
	480 NW 76th Avenue	Suite 304
Enter new mailing address, if applicable:	Margate, Florida	
(Mailing address MAY BE A POST OFFICE BOX)		.
Name of New Registered Agent: New Registered Office Address:	Enter Florida stre	
	Enter r torida stre	et audress
	City	, Florida
Name Desistant & Sant's Companies if showing Desistant & Sant.	•	71p Code
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agrousions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as peing filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my du provided for in Chapte	ities, and I am familiar with and er 605, F.S. Or. if this document is
	B to leave	gnature of New Registered Agent

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

	Aanager Authorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
Mgr	Ana R. Santiago	480 NW 76th Avenue, Suite 304 M	Add
			☐ Remove
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			Remove
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		····	Remove
			Change
			Remove
			☐ Change
			□ Remove
			Change

•	FILED
	18 JUL -5 PM 3: 03
	SCHOOL STATE
fective date, if other than the date of fil	ling:(optional)
n effective date is listed, the date must be specific	and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0 of meet the applicable statutory filing requirements, this date will not be listed
	of State's records.
record enecifies a delayed effective	re date, but not an effective time, at 12:01 a.m. on the earlie
The 90th day after the record is file	
ited	-· -// · / /
	Hal Luter
	of a member or authorized representative of a member

Page 3 of 3

Filing Fee: \$25.00