## 

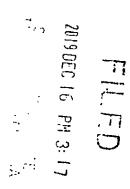
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



700337895567

13/18/19--01/38--005 •• 95.00



Y SULKER JAN 1 5 2020

## **COVER LETTER**

TO:

TO: Registration Se Division of Cor			
OUDINGE	M PRIVILEGES, L.L.C.		
SUBJECT:	Name of Limi	ted Liability Company	
The enclosed Articles of	Amendment and fee(s) are subr	nitted for filing.	
Please return all correspo	ndence concerning this matter t	o the following:	
	RAUL RIO		
		Name of Person	
		Firm/Company	
	3363 W. COMMERCIAL		
		Address	
	FT. LAUDERDALE, FLA		
		City/State and Zip Code	
	rrio@intervalservicing.com	o be used for future annual report not	ification)
For further information c	concerning this matter, please ca		
RAUL RIO		954 485-5400 at ()	
Name o	f Person	Area Code Daytir	ne 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)
<u>Mailing Addre</u> Registration		<u>Street Address:</u> Registration Se	ection
Division of C		Division of Co	orporations
P.O. Box 633		The Centre of	
Tallahassee,	FL 32314	2415 N. Monr	oe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PLATINUM PRIVILEGES, L.L.C					
(Name of the Limit	ted Liability Comp (A Florida Limited	any as it now appears o Liability Company)	n our records.)		
The Articles of Organization for this Limited L	iability Compan	y were filed on JUNE	E 12TH, 2000	and assigned	i
Florida document number L00000007046	·				
This amendment is submitted to amend the foll	lowing:				
A. If amending name, enter the new name of	of the limited lia	bility company here	:		
N/A					
The new name must be distinguishable and contain the	words "Limited Liab	oility Company," the design	gnation "LLC" or the a	bbreviation "L.L.C."	
Enter new principal offices address, if applic	cable:	N/A			
(Principal office address MUST BE A STREI	ET ADDRESS)				
				2019 DE	
Enter new mailing address, if applicable:		N/A			
(Mailing address MAY BE A POST OFFICE	(BOX)			<u>C.</u> ,	<u>,</u>
	1.00-		anda anton the nor		
B. If amending the registered agent and/or agent and/or the new registered office addresses	registered office ess here:	e address on our rec	orus, <u>enter the ha</u> i	ne of the new reg	<u>ustere</u>
Name of New Registered Agent:	N/A				
New Registered Office Address:					
		Enter Florida	a street address		
		·	, Florida _	Zip Code	
		Ciţ		Zip Code	
New Registered Agent's Signature, if changing	Registered Agen	<u>it:</u>			
	, , ,				ieh ek

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>	Address	Type of Action
AMBR	LUIS A. MEDINA	3363 W. COMMERCIAL BLVD.	DAdd
		SUITE 202	=Remove
		FT. LAUDERDALE. FLA.: 33309	
			Remove
			☐Change
			□Add
			□Remove
			☐ Change
			□Add
			□Remove
			□Add
			□Remove
			Change
			🗆 🗆 Add
			Remove
			□Change

	\
_	
•	
<u>-</u>	
-	
_	
in effec ote: II	e date, if other than the date of filing:  tive 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 605.020 (the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a nt's effective date on the Department of State's records.
ecord	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the d.
is file	DECEMBER 12TH, 2019
is file	DECEMBER 12TH.  2019  Control Control
is file	

Filing Fee: \$25.00

Platinum Privileges, L.L.C. 3363 West Commercial Blvd. Suite 202 Ft. Lauderdale, Fla., 33309

December 12th, 2019

## **RESIGNATION AS PRESIDENT**

Dear Sirs:

I hereby tender my resignation as President of Platinum Privileges, L.L.C., with effect as of the date mentioned above, and I acknowledge and confirm that I have no past or present claims whatsoever against the Company or any of its Directors or representatives.

Sincerely

Luis A/ Medina