

L050000 21995

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800269335258

02/17/15--01038--030 **25.00

FEB 23 2015

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

15 FEB 17 AM 11:59

FILED

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Platinum Painting & Associates LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Robert Harrison
Name of Person

Platinum Painting & Associates LLC
Firm/Company

4125 Polston Rd
Address

Lakeland FL 33810
City/State and Zip Code

WayneCaraway77@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Wayne Caraway at (813) 763-2279
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the 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**

Platinum Painting + Associates 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 03/03/2005 and assigned Florida document number L05000021995.

This amendment is submitted to amend the following:

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

Platinum Painting + Remodeling LLC

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

Enter new principal offices address, if applicable:

804 Strawberry Lane

(Principal office address MUST BE A STREET ADDRESS)

Brandon FL 33511

Enter new mailing address, if applicable:

804 Strawberry Lane

(Mailing address MAY BE A POST OFFICE BOX)

Brandon FL 33511

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:

Wayne Caraway

New Registered Office Address:

804 Strawberry Lane

Enter Florida street address

Brandon

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

FILED
15 FEB 17 4:59
STATE
FLORIDA

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member 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>
MGR	Robert J Harrison	4125 Polston Rd	<input type="checkbox"/> Add
		Lakeland FL 33810	<input checked="" type="checkbox"/> Remove
MGR	Wayne Caraway	804 Strawberry Lane	<input checked="" type="checkbox"/> Add
		Brandon FL 33511	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

FILED
 FEB 17 AM 11:59
 CLERK OF SUPERIOR COURT
 JEFFERSON COUNTY ALABAMA

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

E. Effective date, if other than the date of filing: _____ (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated February 12, 2015.

Robert J. Harrison
Signature of a member or authorized representative of a member

Robert J Harrison
Typed or printed name of signee

Page 3 of 3
Filing Fee: \$25.00

FILED
15 FEB 17 AM 11:53
SECRETARY OF STATE
TALLAHASSEE, FLORIDA