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TALL HASSES, FLORIDA

B. BOSTICK
MAY - 1 2012

EXAMINER

COVER LETTER

TO:	Registration Section Division of Corporations		, ,				
	·						
SUBJ	FCT. Flor	ida Plati	num Pai	rtners LLC			
SCD		of Limited	Liability	Company			_
Dear	Sir or Madam:						
The e	nclosed Registered Agent/Registere	ed Office C	Change and	l fee(s) are submitte	ed for fili	ing.	
Please	e return all correspondence concern	ing this ma	atter to the	following:			
	Ryan Chiodo						
	Name of Person						
	Florida Platinum Real	ty					
	26381 South Tamiami Trail S	Suite 108					
	Bonita Springs, Fl 341 City/State and Zip Code	34			FALLAR	12 AP	ezten.
ryan@floridaplatinumrealty.com E-mail address: (to be used for future annual report notification)			n)		SSEE C	APR 30	**************************************
For fu	orther information concerning this n	natter, plea	ise call:		FLURIDA	PN 4:08	
	Ryan Chiodo	at (239	248-05	551		
	Name of Person	(Area	Code & Daytime Teleph	one Numbe	r	
	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301		Registr Divisio P.O. Bo	ation Section on of Corporations ox 6327 assee, Florida 32314			
	Enclosed is a check for the follo	wing amo	unt:				
	\$25 Filing Fee		\$55 F	iling Fee & Certifie	ed Copy		

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

Ryan Chiodo	1. Name of the limited liability company:	Florida Platinum Partners LLC
(b) Mailing address of limited liability company: (Nate: MAY BE POST OFFICE BOX) April 26, 2012 3. Date of filing/registration in Florida 5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State: Registered Agent: Registered Office Address: Registered Office Address: NEW Registered Agent: NEW Registered Agent: NEW Registered Office Address: NEW Registered Offic	2. (a) Principal office address of limited liability	company: 26381 South Tamiami Trail
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) Suite 108 Bonita Springs, FI 34134 April 26, 2012 3. Date of filing/registration in Florida 4. Document number 5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State: Registered Agent: Registered Office Address: Registered Office Address: Registered Office Address: NEW Registered Agent NEW Registered Agent: NEW Registered Agent: NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS) If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company. Signature of a member or authorized representative of a member Ryan Chiodo Fined or typed name of signee I hereby accept the appointment as registered agent and agree to act in this capacity further agree to comply with the provisions of all statutes relative to the proper and complete performance of my datless, and all am damiliar with and accept the obligatomy of the proper and complete performance of my datless, and all and applications of the schinger of the proper and complete performance of my datless, and address. I hereby confirm that the limited liability company has been notified in writing of this change.	(Note: MUST BE STREET ADDRESS)	
April 26, 2012 3. Date of filing/registration in Florida 4. Document number 5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State: Registered Agent: Registered Office Address: Registered Office Address: Registered Office Address: Registered Office Address: Registered Agent (b) Enter name of NEW Registered Agent and/or NEW Registered Office address: NEW Registered Agent: NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS) If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an aftirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company. Signature of a member of authorized representative of a member Ryan Chiodo Printed or typed name of signee I hereby accept the appointment as registered agent and agree to act in this capacities of my duties. Signature of a member of the delignation of my position as registered agent agent agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties. Signature of the confirm that the obligations of my position as registered agent agent and registered agent and provised in the registered agent of the confirm that the limited liability company has been notified in writing of this change.	(b) Mailing address of limited liability compan	00004.0
3. Date of filing/registration in Florida 4. Document number 5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State: Registered Agent: Registered Office Address: Registered Office Address: 28089 Vanderbilt Drive Suite 103 Bonita Springs, Fl 34134 (b) Enter name of NEW Registered Agent and/or NEW Registered Office address: NEW Registered Agent: NEW Registered Agent: NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS) If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company. Signature of a member or authorized representative of a member Ryan Chiodo Printed or typed name of signee I hereby accept the appointment as registered agent and agree to act in this capacitie. In the agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and all am famility with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address. Thereby confirm that the limited liability company has been notified in writing of this change.	(Note: MAY BE POST OFFICE BOX)	
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	Signature of Registered Agent	_

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00