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EXAMINER

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SEORE IAÑY OF STATE ALL'AHASSEB FLORIDA

INMAR 29 PH 12:

COVER LETTER

TO: Registration S Division of Co			•	
SUBJECT:		umServices LLC		
	Name of Limi	ted Liability Company		
The enclosed Articles o	f Amendment and fee(s) are sub	omitted for filing.		
Please return all corresp	ondence concerning this matter	to the following:		
		Derek James	TALLED PHIZ: 32	
		Name of Person		
	RG	RG PlatinumServices LLC		
		Firm/Company		
	41	SE 5th ST Unit 1316	FLOR 3	
		Address	10 P	
		Miami FL 33131	,	
		City/State and Zip Code		
	RGPla	tinumservices@gmail.com		
	E-mail address: (to be used for future annual report notifica	tion)	
For further information	concerning this matter, please of	cail:		
Г	Derek James	at () (888	3)323-9014	
Name of Person		Area Code & Daytime T		
Enclosed is a check for	the following amount:			
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Fiting Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
MAILING ADDRESS:		STREET/COURIE	R ADDRESS:	

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

RG Platinu	w Se	rrices LL	.c	
(<u>Name of the Limited Liability Company</u> (A Florida Limited Lia	y as it now a ability Comp	ppears on our reany)	cords.)	
The Articles of Organization for this Limited Liability Company v Florida document number	were filed or	13/17/	ond and	assigned
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liabil	lity compan	<u>v here</u> :		
			ي بسب	2
The new name must be distinguishable and end with the words "Limite "L.L.C."	ed Liability C	Company," the des	ignation "ILCC" or the	Pabbreviation
Enter new principal offices address, if applicable:			(to)	29
(Principal office address MUST BE A STREET ADDRESS)			mc	_v m
		•	E E E	π D
Enter new mailing address, if applicable:			- Pri	~
(Mailing address MAY BE A POST OFFICE BOX)				
B. If amending the registered agent and/or registered offi registered agent and/or the new registered office address here:		on our record	s, enter the name	e of the new
N. C. D. C. LA			•	
Name of New Registered Agent:				
New Registered Office Address:		Futan Flanida	street address	
	Emer rioriaa	street uuuress	·	
	City	, F	Torida Zip Ce	ode
New Registered Agent's Signature, if changing Registered Agent:	City		Zip Ce	in the second
New Registered Agent's Signature, it changing Registered Agent:		•		•
I hereby accept the appointment as registered agent and agree the provisions of all statutes relative to the proper and comple accept the obligations of my position as registered agent as probeing filed to merely reflect a change in the registered office of company has been notified in writing of this change.	ete perform rovided for	ance of my dution in Chapter 608	es, and I am famil , F.S. Or, if this do	iar with and ocument is

If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	David Britto	8233 NW 3rd Place Coral Springs FL 33071	Add ☐ Remove
			Add Remove
			Add Remove
			Add Remove
			Add 28 Remove
D. If amen	ding any other information, enter chang	ge(s) here: (Attach additional sheets, if necessary.)	299e PH I2: 32
 Dated	March 26,2010,	· · ·	_
	/	r or authorized representative of a member Derek James	
	Турес	or printed name of signee	· · · · · ·

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Filing Fee: \$25.00