

L13000061930

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

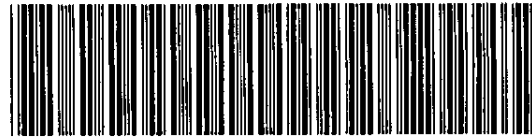
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

AUG 23 2013

J. BRYAN

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: **Platinum Key Properties 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:

**Emi Cox**

Name of Person

**Platinum Key Properties LLC**

Firm/Company

**1416 Arden Ave**

Address

**Clearwater, Florida 33755**

City/State and Zip Code

**platinumkeyproperties@hotmail.com**

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

**Emi Cox**

at ( **727** ) **504-1609**

Name of Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- |  |  |  |  |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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

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TALLAHASSEE, FLORIDA

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

Platinum Key Properties 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 4/29/2013 and assigned  
Florida document number L13000061930.

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This amendment is submitted to amend the following:

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

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:

1416 Arden Ave

**(Principal office address MUST BE A STREET ADDRESS)**

Clearwater, Florida 33755

Enter new mailing address, if applicable:

1416 Arden Ave

**(Mailing address MAY BE A POST OFFICE BOX)**

Clearwater, Florida 33755

**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:

Emi Cox

New Registered Office Address:

1416 Arden Ave

*Enter Florida street address*

Clearwater

*City*

Florida 33755

*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 608, 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.*

Emi Cox  
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

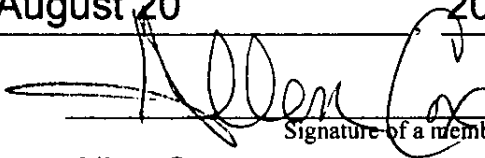
<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
CEO	Allen Cox	2909 Gulf to Bay Blvd	<input type="checkbox"/> Add
		Apt# B-203	<input checked="" type="checkbox"/> Remove
		Clearwater Florida 33759	
CEO	Emi Cox	1416 Arden Ave	<input checked="" type="checkbox"/> Add
		Clearwater Florida 33755	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Add E.I.N # 46-2642300

Dated August 20 2013



Signature of a member or authorized representative of a member

Allen Cox

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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