

**L14000023432**

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

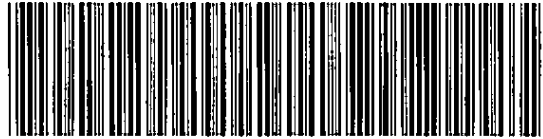
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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2018 OCT -8 PM 1:22  
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RECEIVED  
OCT 20 2018

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Platinum RE Holdings, 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:

Michael Kastrenakes

\_\_\_\_\_  
Name of Person

Platinum RE Holdings LLC

\_\_\_\_\_  
Firm/Company

24639 U.S. 19 n., Suite A

\_\_\_\_\_  
Address

Clearwater, FL 33763

\_\_\_\_\_  
City/State and Zip Code

\_\_\_\_\_  
E-mail address. (to be used for future annual report notification)

mkastren12@gmail.com

For further information concerning this matter, please call:

Michael Kastrenakes

at (\_\_\_\_\_) \_\_\_\_\_

Name of Person

Area Code

Daytime Telephone Number

727 / 23-1913

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

FILED  
2018 OCT -6 PM 1:22  
TALLAHASSEE, FL

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

Platinum RE Holdings, 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 02/11/2014 and assigned  
Florida document number 114000023432.

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 contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

1755 McCauley Rd.

Clearwater, FL 33765

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

1755 McCauley Rd.

Clearwater, FL 33765

**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:

New Registered Office Address:

*Enter Florida street address*

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

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>	<u>Address</u>	<u>Type of Action</u>
MGR	Maria Kastrenakes	1755 McCauley Rd. Clearwater, FL 33765	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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Dated October 4, 2018

\_\_\_\_\_  
Signature of a member or authorized representative of a member

Michael Kastrenakes

\_\_\_\_\_  
Typed or printed name of signee