

L14000028795

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:
Division of Corporations
Fax Number : (850) 617-6383

From:
Account Name : WESTON CORPORATE ADMINISTRATION, LLC
Account Number : 120090000072
Phone : (954) 356-2905
Fax Number : (954) 337-8346

****Enter the email address for this business entity to be used for annual report mailings. Enter only one email address please**

Email Address: INFO@WESTONCA.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
XCLUSIVE PLATINUM PROPERTIES LLC

Certificate of Status	0
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FEB 27 2014

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: XCLUSIVE PLATINUM 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:

Name of Person
WESTON CORPORATE ADMINISTRATION LLC
Firm/Company
2225 N COMMERCE PKWY, SUITE 4
Address
WESTON, FL 33326
City/State and Zip Code
INFO@WESTONCA.COM
E-mail address: (to be used for future annual report notification)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

JACQUELINE F. RODRIGUEZ at **(954) 389-0729**
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 &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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

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

XCLUSIVE PLATINUM 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 2/19/2014 and assigned
Florida document number L14000028795.

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.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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CLERK OF STATE
TALLAHASSEE, FLORIDA

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

_____, Florida _____
City 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

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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>
<u>D</u>	<u>CAMACHO, ENRIQUE</u>	<u>21205 YACHT CLUB DR.</u>	<input type="checkbox"/> Add
		<u>UNIT 3010</u>	<input checked="" type="checkbox"/> Remove
		<u>AVENTURA, FL 33180</u>	
<u>D</u>	<u>CAMACHO, CARLOS E</u>	<u>21205 YACHT CLUB DR.</u>	<input checked="" type="checkbox"/> Add
		<u>UNIT 3010</u>	<input type="checkbox"/> Remove
		<u>AVENTURA, FL 33180</u>	
<u>P</u>	<u>VILLAREAL, ELIZABETH</u>	<u>21205 YACHT CLUB DR.</u>	<input type="checkbox"/> Add
		<u>UNIT 3010</u>	<input checked="" type="checkbox"/> Remove
		<u>AVENTURA, FL 33180</u>	
<u>P</u>	<u>VILLARREAL, MARIA</u>	<u>21205 YACHT CLUB DR.</u>	<input checked="" type="checkbox"/> Add
		<u>UNIT 3010</u>	<input checked="" type="checkbox"/> Remove
		<u>AVENTURA, FL 33180</u>	
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

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 TALLAHASSEE, FLORIDA

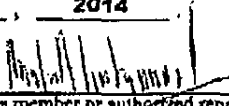
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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

E. Effective date, if other than the date of filing: 2/26/2014 (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 24, 2014


Signature of a member or authorized representative of a member

CARLOS GUTIERREZ

Typed or printed name of signer

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Filing Fee: \$25.00

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