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COVER LETTER

Division of Co			·
SUBJECT: ProCalcs,	LLC		•
3000201.		nited Liability Company	
•	Amendment and fee(s) are sub ondence concerning this matter	•	
	THOMAS PLATANIA		
		Name of Person	
	ProCalcs LLC		
		Firm/Company	
	1296 NE OAK LANE DR	IVE	
		Address	
	JENSEN BEACH, FL 349	957	
		City/State and Zip Code	
	TOM@PROCALCS.NET	to be used for future annual report notif	Contract to the second
For further information of	concerning this matter, please c	-	ncanony
THOMAS PLATANIA		at (772) 882-5700	
Name o	of Person	Area Code Daytime	e Telephone Number
Enclosed is a check for t	he 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 Addre		Street Address:	
Registration : Division of C		Registration Sec Division of Cor	
P.O. Box 632		The Centre of T	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ProCales, LLC (Name of the Limited Liability Co	mpany as it now appears on our recor	ds.)
(A Florida Limi	mpany as it now appears on our recorted Liability Company)	=1 ,
The Articles of Organization for this Limited Liability Comp	any were filed on MARCH 16, 20	and assigned
Florida document number L15000046811		
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 I	inbility Company," the designation "LLo	C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		2 pg 9
(Principal office address MUST BE A STREET ADDRESS	3)	(= 1
		19 ° · · · · · · · · · · · · · · · · · ·
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		29
D. If a second in a the second content of the second of th		
B. If amending the registered agent and/or registered off agent and/or the new registered office address here:	ice address on our records, enter	the name of the new registered
Name of New Registered Agent:	···	
New Registered Office Address:		
	Enter Florida street addre	'55
	, F	lorida Zip Code
	·	Zip Code
New Registered Agent's Signature, if changing Registered Ag		
provisions of all statutes relative to the proper and comp accept the obligations of my position as registered agent being filed to merely reflect a change in the registered of	lete performance of my duties, a as provided for in Chapter 605,	and I am familiar with and F.S. Or, if this document is
I hereby accept the appointment as registered agent and provisions of all statutes relative to the proper and comp accept the obligations of my position as registered agent being filed to merely reflect a change in the registered of company has been notified in writing of this change.	agree to act in this capacity. I fi lete performance of my duties, a as provided for in Chapter 605,	and I am familiar with and F.S. Or, if this document is

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>	Name	Address	Type of Action
MGR	HEATHER PLATANIA	1296 OAK LANE DRIVE	■Add
		JENSEN BEACH, FL 34957	□Remove
			☐ Change
MGR JAMES PLATANIA	131 FRANKLIN PLAZA DRIVE	■Add	
	SUITE 214	□Remove	
	· · · · · · · · · · · · · · · · · · ·	FRANKLIN, NC 28734	□Change
			Remove
		1,	Change
			□Add⊃
		□Remove	
			□Change
			□Add
			□Remove
			□Change
		<u>-</u>	□Add
			□Remove
			□Change

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E. Effe	ective date, if other than the date of filing:	(optional)
Note	e: If the date inserted in this block does not meet the applicable statutory filing requirem	nents, this date will not be liste
doci	ument's effective date on the Department of State's records.	
	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earl	lier of: (b) The 90th day after
If the rec		
If the rec record is		
	July 6	
If the row		cii (c) iiio rom aay ana

Filing Fee: \$25.00

Typed or printed name of signee