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Certified Copies	_ Certificates	of Status			
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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Hope Moving and Storage 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:
Margaret Drayton
Name of Person
Platinum Global Communications
6296 S. Ridgewood Ave
Port Orange 72 3212) City/State and Zip Code
Figure address: (to b) used for future annual report notification)
For further information concerning this matter, please call:
Margaret Drayton at (40), 486 - 2203 Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\Bigcup \$30.00 Filing Fee & B\$60.00 Filing Fee & Certificate of Status \$\Bigcup \$ Certificate of Status \$\Bigcup

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Hope Moving ar	V Company as it no Cappears on our records.) (Limited Liability Company)
(A Florida	(Y Company as it nowappears on our records.) Elimited Liability Company)
The Articles of Organization for this Limited Liability C Florida document number $\perp 180001574$	Tompany were filed on $\frac{6272018}{22}$ and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limit Platinum Global Complete the new name of the limit platinum Global Complete the new name must be distinguishable and contain the words "Limit platinum".	ited liability company here: MUNICATIONS LLC ited I iability Company," the designation "L.L.C." or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
Principal office address MUST BE A STREET ADDR	MESS)
	- 201
Enter new mailing address, if applicable:	
Mailing address MAY BE A POST OFFICE BOX)	
	
B. If amending the registered agent and/or registered agent and/or the new registered office addi	tered office address on our records, <u>enter the name of the new</u> ress here:
Name of New Registered Agent:	
New Registered Office Address:	Enter Florada street address
	Florida

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, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
			Remove
			☐ Change
			□ Remove
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Note: If	the date inse	rted in this b	., ., ., .,	neet the a	ipplicable statu		(optional) 90 days after filing.) Pursuant to 605.0 ements, this date will not be listed	
			d effective tord is filed		it not an eff	ective time, a	t 12:01 a.m. on the earlier	of:
Dated	5/1/2	019	C	Γ	Bayle	<u> </u>		
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Page 3 of 3

Filing Fee: \$25.00