## 11800176620

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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## **COVER LETTER**

TO: Registration Se Division of Con			•		
SUBJECT:	Total Cash	Home Buyers, LLC			
	Name of Lim	ited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return all correspo	ondence concerning this matter	to the following:			
		Brandy Pollack			
		Name of Person			
	Tota	Total Cash Home Buyers, LLC Firm/Company			
		Time Company			
	2627	2627 NE 203rd Street, Suite 218 Address			
		Aventura, FL 33180			
		City/State and Zip Code			
	<u> </u>	randypollack@gmail.com to be used for future annual report not	afication)		
For further information of	oncerning this matter, please co	ail:			
Brandy	/ Pollack	at ( <u>786</u> ) <u>623-93</u>			
Name (	f Person	Area Code Daytin	ne 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)		
Regist	ING ADDRESS: ration Section on of Corporations	STREET/COUR Registration Secti Division of Corpc	on		

P.O. Box 6327 Tallahassee, FL 32314 Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Platinum Realty &	Investments, In	IC.	
Platinum Realty &  (Name of the Limited Liability Compa (A Florida Limited)	<u>iny as it now appears</u> Liability Company)	on our records.)	30
The Articles of Organization for this Limited Liability Company			and assigned
Florida document numberL18000176620			à.
This amendment is submitted to amend the following:  A. If amending name, enter the new name of the limited liab	oility company her	<u>e</u> :	E 0 E
The new name must be distinguishable and contain the words "Limited Liabi			
nter new principal offices address, if applicable: 16853 NE 2nd Avenue, Su		d Avenue, Suite :	305A
(Principal office address MUST BE A STREET ADDRESS)	North Miami	<u>Beach, FL 33162</u>	<u> </u>
Enter new mailing address, if applicable:  Mailing address MAY BE A POST OFFICE BOX)  North Miami Beach, FL 33		· · · · · · · · · · · · · · · · · · ·	
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her  Name of New Registered Agent:  New Registered Office Address:	<u>e</u> :	our records, <u>enter</u>	the name of the
		, Florida	
	Cire		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>	Address	Type of Action
MGR	Jodi Pollack	1858 NW 141st Avenue	
		Pembroke Pines, FL 33028	☑ Remove
			Change
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ective date, if other than the date of filing:    effective date is listed, the date must be specific and cannot be prior t	(optional)  Odate of filing or more than 90 days after filing ) Pursuant to 605 020
te: If the date inserted in this block does not meet the applica nument's effective date on the Department of State's records.	
record specifies a delayed effective date, but not he 90th day after the record is filed.	an effective time, at 12:01 a.m. on the earlier
ed November 2nd . 2018	<del>-</del> '
Signature of a member or author	rized representative of a member
•	

Page 3 of 3

Filing Fee: \$25.00

## **Total Cash Home Buyers, LLC**

2627 NE 203<sup>rd</sup> Street, Suite 218, Aventura, FL 33180

Phone: 305-330-5649 ~ Fax: 305-397-1325

brandy@totalchb.com

November 2, 2018

Please be advised that I want to be removed from the corporation.

Regards,

JodiPollack

Jodi Pollack