K19000081221

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COVER LETTER

TO:

Tallahassee, FL 32314

	tration Section ion of Corporations				
SUBJECT:	Platinum	1 Pools	&	Paradises	LLC
_		Name of Lim	ited Liabili	ty Company	
The enclosed A	Articles of Amendment	and fee(s) are sub	mitted for	tiling.	
Please return a	ll correspondence conc	cerning this matter	to the foll	owing:	
			Zac Nar	hary Lyons	·
			Fin	n/Company	
			716	Falkirk Av	(6
				, FL 33!	
			City/Sta	te and Zip Code	
	,	E-mail address: (9 Ch do	beast 123 a) for future annual report notif	Yqhoo.CoM fication)
For further inf	ormation concerning th	nis matter, please c	all:		
29	chary Lyo	ns	at	(<u>813</u>) <u>995</u> -	3377
	Name of Person			Area Code Daytime	c Telephone Number
Enclosed is a c	check for the following	amount:			
\$25.00 Fil	ing Fee	0 Filing Fee & ificate of Status	Ce	5.00 Filing Fee & rtified Copy ditional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	ing Address: istration Section			Street Address: Registration Sec	ction
Divi	sion of Corporation	ns		Division of Cor	porations
P.O.	Box 6327			The Centre of T	allahassee

2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Platinum Pool		Paradise.	s LLC
(Name of the Limited Liability Company (A Florida Limited Lia	y as it now appears ibility Company)	on our records.)	
The Articles of Organization for this Limited Liability Company w	vere filed on	3-25-20	19 and assigned
Florida document number <u>L19000081221</u>			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabili	ity company her	<u>e</u> :	
Paradise Pools of The new name must be distinguishable and contain the words "Limited Liability	Tampa	Bay	LLC
The new name must be distinguishable and contain the words "Limited Liability	y Company the des	ignation "LLC or	the abbreviation "L.L.C
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)			
			
			221
Enter new mailing address, if applicable:			•
(Mailing address MAY BE A POST OFFICE BOX)			් ආ
			TD . " .

B. If amending the registered agent and/or registered office adagent and/or the new registered office address here:	ldress on our rec	cords, <u>enter the</u>	name of the new registered
agent and/or the new registered office address here.			
Name of New Registered Agent:			· · · · · · · · · · · · · · · · · · ·
N Denistered Office Address.			
New Registered Office Address:	Enter Floria	la street address	
		, Floric	ła
	City	, FIOFIC	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
			□Add
			□Remove
			□Change
			□Add
			□Remove
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i effec <u>te:</u> - If	e date, if other than the date of filing: 11-06-2021 (optional) tive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.020 the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed ant's effective date on the Department of State's records.
s fileo	
.ed _	November 5th 2021 Signature of a member or authorized representative of a member
	Signature of a member or authorized representative of a member
	,