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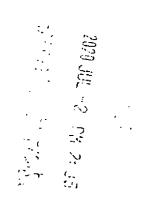
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## **COVER LETTER**

		ration Sec on of Corp				
	P	LATINUN	M WORLD COUNCIL SEPA	Graff C		
GURJECT:						
The <b>en</b> elo	osed A	rticles of a	Amendment and fee(s) are sub-	nitted for filing.		
Please re	turn al!	correspo	ndence concerning this matter	to the following:	52	
			ALBERT V BARTOLO			
				Name of Person	, , , ,	
			PLATINUM WORLD CO	UNCIL SERVICES LLC	2	
				Firm/Company		
12222 MONARCH CIRCL			12222 MONARCH CIRCI	Æ	(E.M 20)	
Address						
	SEMINOLE, FL 33772					
			<u> </u>	City/State and Zip Code		
			ALBERTVBARTOLO@G			
			E-mail address: (	to be used for future annual report no	tification)	
For furth	er info	rmation c	oncerning this matter, please ca	all:		
ALBER"	T V Ba	OLOTAZ		727 744-2121 at ( )		
		Name o	f Person	Area Code Daytii	me Telephone Number	
Enclosed	d is a cl	heck for th	ne following amount:			
<b>■ \$2</b> 5.	.00 Fili	ng Fee	S30.00 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)	
	Regis Divis P.O.	Box 632	Section forporations	Street Address: Registration S Division of Co The Centre of 2415 N. Monr Tallahassee, F	orporations Tallahassee oe Street, Suite 810	

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PLATINUM WORLD COUNCIL SERVICES 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  $\frac{04/22/2019}{}$ and assigned Florida document number 1,19000108684 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: BARTOLO ENTERPRISES LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC. 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) 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

## 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
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Tective date, if other than the date of filing:  an effective date is listed, the date must be specific and cannot be prior to date of to the date inserted in this block does not meet the applicable status ocument's effective date on the Department of State's records.	(optional) filing or more than 90 days after filing.) Pursuant to 605,020 ttory filing requirements, this date will not be listed a
record specifies a delayed effective date, but not an effective time, at 12: is filed.	:01 a.m. on the earlier of: (b) The 90th day after the
1, 1, 30 2020	
ated Jene 30 . 2020.  Mignature of a member or authorized tepr	