N9000175735

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cil	ty/State/Zip/Phon	e #)
PICK-UP	☐ WA!T	MAIL
(Bu	isiness Entity Nar	me)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	





200333405122

09/03/19--01030--004 **25.00

2019 SEP -3 AM 8: 46

Y SULKER SEP 12 2019

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: A and C Platinum Logistics LCC. 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:
Angel Downd Rivas
Hand C Platinum Logistics LC.
246 SW 15t Ct. Address
Dania, Fl. 33004 City/State and Zip Code
For further information concerning this matter, please call:
Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\Bigcup \\$30.00 Filing Fee & Certificate of Status \$\Bigcup \\$ Certificate of Status \$\Bigcup \\$ (additional copy is enclosed) \$\Bigcup \\$ (additional copy is enclosed) \$\Bigcup \\$ (additional copy is enclosed)

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

(Name of the Limited I.	iability Compan lorida Limited Li	y as it now appears on ou ability Company)	r records.)	LIC	
The Articles of Organization for this Limited Liabil	ity Company v 57:35	were filed on <u>Ju</u>	<u>~ 8,2</u>	019 and assi	gned
This amendment is submitted to amend the following	ng:				
A. If amending name, enter the new name of the	e limited liabil	lity company here:			
The new name must be distinguishable and contain the words	"Limited Liabilit	ty Company," the designat	ion "LLC" or the	abbreviation "L.L	C."
Enter new principal offices address, if applicable	e:				
(Principal office address MUST BE A STREET A	DDRESS)				
				SEP -3	
Enter new mailing address, if applicable:				<u> </u>	
(Mailing address MAY BE A POST OFFICE BO)	<u>V)</u>			(R) 15 (R) 15 (R	<u></u>
B. If amending the registered agent and/or registered agent and/or the new registered office	~ .		records, <u>ente</u>	r the name o	of the new
Name of New Registered Agent:	Ange	el Davie	1 Riva	S	
New Registered Office Address:		Enter Florida stre	et address		
			. Florida		
_		City	, 1 101 104 _	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 = A	authorized Member		
Title	<u>Name</u>	Address	Type of Action
			Add
			Remove
			Change
			☐ Remove
			Change
		·····	Add
			☐ Remove
			Change
		. -	
			☐ Remove
			Change
			D Add
			☐ Remove
			Change
			🗖 Add
			□ Remove
			Change

	
Note:	tive date, if other than the date of filing:
	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: 90th day after the record is filed.
Dated	August 30, 2019.
	AK.
	Signature of a member or authorized representative of a member
	·