

L2 00000003408

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)



PICK-UP



WAIT



MAIL

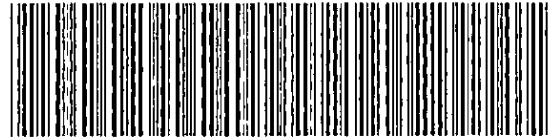
(Business Entity Name)

(Document Number)

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2020 AUG 21 PM 4:44
2020 AUG 21 PM 3:54

C. GOLDEN

AUG 21 2020

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Shay's Platinum Properties 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:

Sharon Modeste

Name of Person

Shay's Platinum Properties LLC

Firm/Company

2812 N. Orange Blossom Trail

Address

Orlando, FL 32804

City/State and Zip Code

shaysplatinumpropertiesllc@yahoo.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Sharon Modeste

321
at ()
Area Code

444-9915

Daytime Telephone Number

Enclosed is a check for the 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)

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Shay's Platinum Properties LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

2020 APR 20 PM 3:54

The Articles of Organization for this Limited Liability Company were filed on 12/23/2019 and assigned
Florida document number L20000003408

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

2812 N. Orange Blossom Trail

(Principal office address MUST BE A STREET ADDRESS)

Orlando, FL 32804

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:

Sharon Modeste

New Registered Office Address:

2812 N. Orange Blossom Trail

Enter Florida street address

Orlando

City

Florida 32804

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.


Sharon Modeste
If Changing Registered Agent, Signature of New Registered Agent

...ing 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>	<u>Address</u>	<u>Type of Action</u>
AMBR	Sharon Modeste	2812 N. Orange Blossom Trail	<input checked="" type="checkbox"/> Add
		Orlando, FL 32804	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
		5864 Auvers Blvd	<input type="checkbox"/> Add
		101	<input checked="" type="checkbox"/> Remove
		Orlando, FL 32807	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Change

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Add EIN# 84-4405711

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E. Effective date, if other than the date of filing: _____ (optional)
(If an effective date is listed, the date must be specific.)

(If an effective 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 605.0207 (3)(b)
 Note: If the date inserted in this block does not match the date of filing, the date of filing must be inserted in this block.

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated August 19th 2020

Signature of a member

Signature of a member or authorized representative of a member

Sharon Modeste

Typed or printed name of signee