

1/28/2020

Division of Corporations



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H20000031814 3)))



H200000318143ABCT

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To: Division of Corporations
Fax Number : (850)617-6383

From: Account Name : SILVAS FINANCIAL SERVICES, L.L.C.
Account Number : 120020000100
Phone : (305)944-9755
Fax Number : (888)401-1914

SECRETARY OF STATE
TALLAHASSEE, FL

2020 JAN 28 PM 12: 21

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****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
PREMIUM CONSULTING & INVESTMENT LLC**

Certificate of Status	0
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JAN 29 2020

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COVER LETTER**TO: Registration Section
Division of Corporations****SUBJECT: PREMIUM CONSULTING & INVESTMENT 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:

FREDSON JUSTO

Name of Person

PREMIUM CONSULTING & INVESTMENT LLC

Firm/Company

5220 S UNIVERSITY DR SUITE 102

Address

DAVIE FL 33328

City/State and Zip Code_____
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

FREDSON JUSTO

Name of Person

at (_____) _____

Area Code

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/COURIER ADDRESS:**
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PREMIUM CONSULTING & INVESTMENT 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 01/09/2020 and assigned
Florida document number L20000017046.

This amendment is submitted to amend the following:

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

N/A

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:

N/A

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

N/A

(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:

N/A

New Registered Office Address:

Enter Florida street address

Florida

City

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

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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>	<u>Address</u>	<u>Type of Action</u>
MGR	INTERNATIONAL THING LLC	200 CONTINENTAL DRIVE SUITE 401	<input type="checkbox"/> Add
		NEWARK, DE 19713	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	JUSTO, FREDSON	5220 S UNIVERSITY DR	<input checked="" type="checkbox"/> Add
		SUITE 102	<input type="checkbox"/> Remove
		DAVIE, FL 33328	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Change

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TALLAHASSEE, FL

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Dated JANUARY 28TH 2020

Signature of a member or authorized representative of a member

FREDSON JUSTO

Typed or printed name of signee