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(Address)				
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(Business Entity Name)				
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2020 NOV 13 PM 4: 46
SECRETARY OF STATE

11/13/20



COVER LETTER

то:	Registration Sect Division of Corpo			
SUBJE	ст: <u>РДА[*]Т</u>	Name of Limi	LLC ted Liability Company	
The end	closed Articles of A	mendment and fee(s) are sub-	nitted for filing.	
Please i	return all correspond	dence concerning this matter t	to the following:	
		Cesi	ar Lishner	, -
		PLATIN	Name of Person UM ECOM LL	-C
			Firm/Company	
		15420 2M	184+h ST	
		Miani K31c	City/State and Zip Code INC O Grail. To be used for future annual report not	COM (fication)
For fur	ther information cor	ncerning this matter, please ca	alt:	
<u> </u>	CSM (is	_ `	at (754) 900 Area Code Daytin	9413 ne Felephone Number
Enclose	ed is a check for the	following amount:		
X ,52.	5,00 Filmg Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy radditional copy is enclosed)	☐ S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

And the second

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

Platering Francis 1 10

FILED

SECRETARY OF STATE

2020 NOV 13 PM 4: 46

(Name of the Limited Liability Comp . (A Florida Limited	any as it now appears on our records (\$1705555.51) Liability Company)					
The Articles of Organization for this Limited Liability Company Florida document number $\angle 20000119553$.	y were filed on $0.5 - 0.4 - 2.0.20$ and assigned					
This amendment is submitted to amend the following:						
. If amending name, enter the new name of the limited liability company here:						
The new name must be distinguishable and contain the words "Limited Liab	ulity Company," the designation "LLC" or the abbreviation "L.L.C."					
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 agent and/or the new registered office address here:	address on our records, <u>enter the name of the new registered</u>					
Name of New Registered Agent:						
New Registered Office Address:	Enter Florida street address					
	, Florida					

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.

Zip Code

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>	Type of Action
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D. If amo	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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(tf an cf <u>Note:</u>	ive date, if other than the date of filing: [converdate is listed, the date most be specific and cannot be price to date of filing or over than 90 days after filing.) Pursuant to 605,0207 (38th) If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be fixted as the nent's effective date on the Department of State's records.
If the record is fi	rd 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 led.
Dated	11-13-20 Decl
	Signature of a homber of authorized representative of a member SAL S NC

Filing Fee: \$25.00