(Requestor's Name)	
(Address)	
(Address)	
(Addiess)	
(City/State/Zip/Phone #)	
PICK-UP WAIT	//AIL
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Serumed Copies Serumentes of States	
Special Instructions to Filing Officer:	
	Ì
<u> </u>	

Office Use Only



300367720903

2021 JUN 10 AH 10: 04

JUN 1 1 2021 ! ALBRITTON

Sunshine State Corporate Compliance Company

3458 Lakeshore Drive, Tallahassee, Florida 32312 (850) 656-4724

DATE 6/9/2021	_			#WALK IN*
ENTITY NAME_PLAT	INUM HEART, LLO	0		***************************************
DOCUMENT NUMBER	L21000182020			
	PLEASE FILE	THE ATTACHE	D AND RETURN	
XXXX	Plain Copy			10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	Certified Copy			
	Certificate of Stat	tas		
	Certified Copy of s	Arts & Amendmen	DR THE ABOVE ENTITY**	
	Certificate of Good		CERTIFICATION**	·
	,	/ 110171N171 - (CK II IO II IO II	
COUNTRY OF DESTINA			·	
NUMBER OF CERTIFICA	ATES REQUESTED_			
TOTAL OWED \$25.00)		ACCOUNT #: 120160000072	2 .
Please call Tina at	the above number f	for any issues	or concerns. Thank you so	much!

COVER LETTER

Tallahassee, FL 32314

	gistration Se vision of Cor			
SUBJECT:		M HEART LLC		
зовлест.	·	Name of Lim	ited Liability Company	
The enclose	d Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please retur	n all correspo	ondence concerning this matter	to the following:	
		Kelsey Polasek		
			Name of Person	
		ZenBusiness INC		
			Firm/Company	
		5511 Parkcrest Drive STE	207	
			Address	
		Austin, Texas, 78731		
		2.1511 2 1	City/State and Zip Code	1.11
		fulfillment@zenbusiness.co E-mail address: (om to be used for future annual report no	((fication)
For further i	information c	oncerning this matter, please c	•	
Kelsey Pol	nsek c/o ZenF	Business INC	844 493-6249	
	Name o	f Person	at () Area Code Daytir	ne Telephone Number
Enclosed is	a check for th	he 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)
	ailing Addres		Street Address:	
	gistration S vision of C	Section forporations	Registration So Division of Co	
	O. Box 632		The Centre of	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PLATINUM HEART 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 Compa	. ب
Florida document number L21000182020	ny were filed on 5/7/2021 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited li	ability company here:
The new name must be distinguishable and contain the words "Limited Li	ability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	2285 Kingsley Ave Suite A Orange Park, FL 32073
(Principal office address MUST BE A STREET ADDRESS)	
	2285 Kingsley Ave Suite A Orange Park, FL 32073
Enter new mailing address, if applicable:	2200 tengsies (Tve Saite / Collinge Filik, Fit 520/2
	re address on our records, enter the name of the new registe
B. If amending the registered agent and/or registered offic agent and/or the new registered office address here:	re address on our records, <u>enter the name of the new registe</u>
B. If amending the registered agent and/or registered offic agent and/or the new registered office address here: Name of New Registered Agent:	re address on our records, enter the name of the new registe
B. If amending the registered agent and/or registered offic agent and/or the new registered office address here:	ee address on our records, enter the name of the new registe
B. If amending the registered agent and/or registered offic agent and/or the new registered office address here: Name of New Registered Agent:	Enter Florida street address
B. If amending the registered agent and/or registered offic agent and/or the new registered office address here: Name of New Registered Agent:	
B. If amending the registered agent and/or registered offic agent and/or the new registered office address here: Name of New Registered Agent:	Enter Florida street address Florida City: 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>	Name	Address	Type of Action
AMBR	Elijah Moore	2285 Kingsley Ave Suite A Orange Park, FL 32073	□Add
			□Remove
			Change
		.	□Add
			□Remove
			□Change
			□Add
			□Remove
			⊡Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Add
			□Remove
			Change

·	 				-	
				····	. <u></u>	
						
						
						
						<u> </u>
				<u> </u>		
					·	
	-					
ective date, if other than n effective date is listed, the date te: If the date inserted in thi cument's effective date on th	must be specific and s block does not t	d cannot be prior meet the applica	able statutory fil	more than 90 days		
cord specifies a delayed effe s filed.	ctive date, but no	t an effective ti	me, at 12:01 а.п	. on the earlier o	f: (b) The 90t	h day after the
ed		2021				
/s/_Cliyas	h Moore					
7-7-6-9-	Signature of a	member or autho	orized representati	ve of a member		

Filing Fee: \$25.00