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## **COVER LETTER**

Division of Cor	porations					
PLATANI SUBJECT:	A FL LLC					
3000ECT.	Name of Lim	ited Liability Company	<del>, ,</del>			
The enclosed Articles of a	Amendment and fee(s) are sub	mitted for filing.				
	ndence concerning this matter	-				
	BRIDGET A. PLATANIA					
	-	Name of Person				
		Firm/Company				
	812 BRINY AVENUE #10A					
		Address				
	POMPANO BEACH, FL					
	PLATANIA999@GMAIL.					
	E-mail address: (	to be used for future annual report no	otification)	( <del>)</del>	202	
For further information co	oncerning this matter, please c	all:			2021 AUS	7
BRIDGET A, PLATANI		847 254-1253 at ()			<u>කි</u>	77-74 1 Juli
Name of	f Person	Area Code Dayt	me Telephone Number	<u> </u>	T)	1
Enclosed is a check for th	e following amount:				3: 52	
\$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified (	e of Status &		

**Mailing Address:** 

TO:

Registration Section

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

PLATANIA FL LLC		
( <u>Name of the Limited Liability</u> (A Florida I	Company as it now appears on our record limited Liability Company)	<u>s.</u> )
The Articles of Organization for this Limited Liability Co. Florida document number 1.21000217151	and assigned	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limite	ed liability company here:	
The new name must be distinguishable and contain the words "Limite	ed Liability Company," the designation "LLC	" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRE	ESS)	202 5 :
		5
Enter new mailing address, if applicable:	·····································	
(Mailing address MAY BE A POST OFFICE BOX)		
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		· · · · · · · · · · · · · · · · · · ·
B. If amending the registered agent and/or registered of agent and/or the new registered office address here:	office address on our records, <u>enter</u>	the name of the new registered
Name of New Registered Agent:	<del></del>	
New Registered Office Address:		
	Enter Florida street address	<u> </u>
		orida
	Ciţv	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 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>	Address	Type of Action
AMBR	JAMES R. PLATANIA SR	812 BRINY AVENUE #10A	□Add
		POMPANO BEACH, FL 33062	■Remove
			Change
			🗆 Remove
			□Change
		<del>-</del>	🗀 Add
			2021
			□Change
			□Remove
		·	□Change
			□Remove

Typed or printed name of signee