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FILED 1022 FEB -7 PM 3: 05 FECRETARY OF STATE

Y. SCOTT FEB 16 2022

COVER LETTER

Registration Section Division of Corporations

TO:

	ANERS, LLC		•	•	e .		
SUBJECT:	Name of Lin	nited Liability Company		_			
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filling.					
Please return all correspo	ondence concerning this matter	to the following:					
	DIANA C GONZALEZ V	ELEZ		2022 FEB - 7 PM 3: US SECRETARY OF STATE STALLAHASSEE, FL			
		Name of Person		FB - 83	•		
	R&G CLEANERS, LLC			芸山	1		
		Firm/Company		SSE PR	,		
	4328 MINERVA DR			E. FIA	 <u>></u>		
	_	Address		— [FR 0	1		
	LAKE WORTH, FL 3346						
		City/State and Zip Code					
	F-mail address: 6	to be used for future annual report not	ification)	_			
For further information c	oncerning this matter, please c						
DIANA C GONZALEZ		561 762-5000 at ()					
Name o	f Person	Area Code Daytin	ne Telephone Numl	ber			
Enclosed is a check for the	ne following amount:						
□ \$25.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certifi Certifi	Filing Fcc, cate of Status & ed Copy nal copy is enclosed			
Mailing Addres Registration S	Section	Street Address: Registration Se					
Division of C P.O. Box 632		Division of Corporations The Centre of Tallahassee					
Tallahassee. I		2415 N. Monro		810			

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

R&G CLEANERS, 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 $\frac{06/01/2021}{2}$ and assigned Florida document number L21000254642 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: PLATINIUM MULTISERVICES, LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abb 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 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: New Registered Office Address: Enter Florida street address

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.

City

If Changing Registered Agent, Signature of New Registered Agent

, Florida

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
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			Remove
			□ Change
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	FEBRUARY	κΛ		2022						
Dated	/	VI 1								

Filing Fee: \$25.00

Typed or printed name of signee