## 122000022523

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T. MATTHEWS MAY 16 2022

## **COVER LETTER**

TO:

Registration Section

Registration Section

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32314

**Division of Corporations** Platinum Plus Event Rentals SUBJECT: \_ 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: Ingrid D. Gibson Name of Person Platinum Plus Event Rentals Firm/Company 2136 NW 8th Avenue Suite 214 Address Miami, FL, 33127 City/State and Zip Code PlatinumPlusEventRental@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Ingrid D. Gibson Daytime Telephone Number Name of Person Enclosed is a check for the following amount: □ \$25.00 Filing Fee **■** \$30.00 Filing Fee & □ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee, Certificate of Status Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed) (additional copy is enclosed) Street Address: Mailing 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 COLUMN OF CORPORATIONS OF ORGANIZATION OF CORPORATIONS

22 APR 15 AM 9: 16

Platinum Plus Event Rentals

(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 Lia Florida document number 1.22000022523	bility Company	were filed on $\frac{01/07/200}{0}$	22 and assigned
This amendment is submitted to amend the follow	wing:		
A. If amending name, enter the new name of	the limited liab	oility company here:	
N/A			
The new name must be distinguishable and contain the wo	rds "Limited Liabi	lity Company," the designat	ion "LLC" or the abbreviation "L.L.C."
amendment is submitted to amend the following:  f amending name, enter the new name of the limited liable of the most be distinguishable and contain the words "Limited Liabiler new principal offices address, if applicable:  actinal office address MUST BE A STREET ADDRESS)  er new mailing address, if applicable:  address MAY BE A POST OFFICE BOX)  f amending the registered agent and/or registered office and and/or the new registered office address here:  Name of New Registered Agent:	2136 NW 8th Avenue		
If amending name, enter the new name of the limited liab  A c new name must be distinguishable and contain the words "Limited Liabi inter new principal offices address, if applicable:  rincipal office address MUST BE A STREET ADDRESS)  Inter new mailing address, if applicable:  Mailing address MAY BE A POST OFFICE BOX)  If amending the registered agent and/or registered office and/or the new registered office address here:  Name of New Registered Agent:  New Registered Office Address:  2136 NW 8th A	Suite 214		
	· · · · · · · · · · · · · · · · · · ·	Miami, LF 33127	
Enter new mailing address, if applicable:		2136 NW 8th Avenue	
	Suite 214		
		Miami, FL 33127	
		address on our record	s, enter the name of the new registere
Name of New Registered Agent:			
New Registered Office Address:	2136 NW 8th A	Avenue, Suite 214	
		Enter Florida stre	ver address
	Miami		Florida <sup>33127</sup>
		City	Zıp 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, <u>enter the title, name, and address of each person</u> <u>being added</u> <u>or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
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record is file	ites a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after	r the
ated _	2022	

Filing Fee: \$25.00

Typed or printed name of signee