122000047893

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2022 HAR 14 AM 6: 42: SECRETARY OF STATE

A. BUTLER MAR 2 8 2022

COVER LETTER

	egistration Sec Division of Corp		•		
SUBJEC		PLUS AUTO GLASS LLC			
SOBJEC		Name of Lim	ited Liability Company		
The enclo	sed Articles of /	Amendment and fee(s) are sub	mitted for filing.		
Please ret	urn all correspor	ndence concerning this matter	to the following:		
		JACK C VASILAROS			
			Name of Person		
		PLATINUM PLUS AUTO	GLASS LLC		
			Firm/Company		
		1361 S. MISSOURI AVE			
			Address		
	CLEARWATER, FL 33756				
			City/State and Zip Code		
		info@platinumplusautoglas			
Lan finitha	n in Cornealian and		to be used for future annual repor	t hotification)	
		ncerning this matter, please c			
JACK C VASILAROS		727 455940 at ()			
	Name of	Person	Area Code D.	aytime Telephone Number	
Enclosed i	is a check for the	e following amount:			
■ \$25.0°	0 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)	
	<u>Iailing Address</u> Registration S		Street Addres Registration		
Ĭ.	Division of Co	orporations	Division of Corporations		
P.O. Box 6327		The Centre of Tallahassee			

Tallahassee, FL 32314

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

PLATINUM PLUS AUTO GLASS LLC

2022 MAR 14 AM 6: 42

(Name of the Limited Liability Company as it now appears on our records): JARY OF STATE

(A Florida Limited Liability Company)

FOLIALIA COSES FATE TALLAHASSEE, FL The Articles of Organization for this Limited Liability Company were filed on $\frac{1.22000047893}{1.22000047893}$ ___ and assigned Florida document number L22000047893 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 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. If Changing Registered Agent, Signature of New Registered Agent

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
MGR	JACK C VASILAROS	111 BAYSIDE DRIVE	= Add
		CLEARWATER, FL 33767	□ Pourous
			□Change
			□Add
			□Remove
			□ Change
	·		□Add
			□Remove
			Change
			□Add
			□Remove
			Change
•••			□Add
			Remove
			□Add
			□Remove
			Change

	
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E. Effec	tive date, if other than the date of filing: 01/27/2022 (optional)
Note:	If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listement's effective date on the Department of State's records.
	•
If the reco	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after
record is i	neu.
	January 27 2022
Dates	·
Dated	
Dated	Signature of a member or authorized representative of a member

Filing Fee: \$25.00

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