

L07000099359

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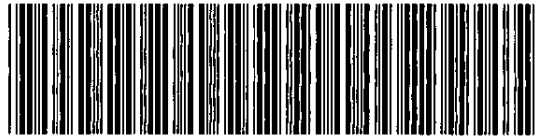
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08 OCT 22 AM 11:20

J. BRYAN

OCT 23 2008

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Realty Rents LLC
(Name of Limited Liability Company)

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DIVISION OF CORPORATIONS
08 OCT 22 AM 11:20

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Kari FAUGHT
(Name of Person)

Realty Rents LLC
(Firm/Company)

2039 W. 1st Street Suite #2
(Address)

Fort Myers FL 33901
(City/State and Zip Code)

For further information concerning this matter, please call:

Kari Faught at (239) 225-1234 or 239-745-2700
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the 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)

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

FILED
SECRETARY OF CORPORATIONS
DIVISION OF CORPORATIONS
08 OCT 22 AM 11:20

Realty Rents 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 9-28-07 and assigned
Florida document number L07000099359

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 end with the words "Limited 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 ADDRESS)

2039 W. 1st Street Suite #2
Fort Myers, FL 33901

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

2039 W. 1st Street Suite #2
Fort Myers, FL 33901

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:

Kari Fought

New Registered Office Address:

2039 W. 1st Street Suite #2

(Enter Florida street address)

Fort Myers

(City)

Florida

FL 33901

(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 608, 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.

Kari Fought
(If Changing Registered Agent, Signature of New Registered Agent)

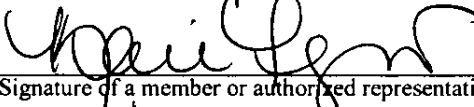
If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager
MGRM = Managing Member

Title	Name	Address	Type of Action
MGRM	Terry Wayland	2039 W. 1st Street Suite #2 Fort Myers FL 33901	☒ Add ☒ Remove
MGRM	Kari Faught	2039 W. 1st Street Suite #2 Fort Myers FL 33901	☒ Add ☒ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Dated October, 16, 2008


Signature of a member or authorized representative of a member

KARI FAUGHT
Typed or printed name of signee

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10/22/2008 10:59 FAX

Division of Corporations

001/002

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L08000096659

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Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : FOWLER, RODRIGUES, VALDES-FAVLE
Account Number : 120050960138
Phone : (786) 364-8480
Fax Number : (786) 364-8401

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TAINO HOLDINGS, LLC

Certificate of Status	0
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Estimated Charge	\$55.00

J. BRYAN

OCT 23 2008

EXAMINER

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ARTICLES OF AMENDMENT TO
ARTICLES OF ORGANIZATION OF
TAINO HOLDINGS, LLC
(a Florida Limited Liability Company)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
08 OCT 22 AM 8:37

First: The date of filing of the original Articles of Organization was October 13, 2008.

Second: The following amendment to the Articles of Organization was duly adopted by the limited liability company:

ARTICLE V
MANAGEMENT

The Company is to be managed by its Manager as set forth in its Operating Agreement and is therefore a manager-managed company. The initial Manager is: Francisco Javier Moreno, c/o 355 Alhambra Circle, Suite 801, Coral Gables, FL 33134.

Dated: October 22, 2008



Signature of a member or authorized representative of a member

RAUL VALDES-FAULI

Typed or printed name of signee

Fax Audit H08000241508 3