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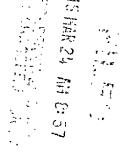
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Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	

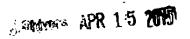




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Registration section Division of Corporation P.O.Box 6327 Tallahassee FL 32314

COVER LETTER

Division of Corp			
SUBJECT: JUST.	GO-JET.SKI & BOATS	S, LLC	
	Name of Lim	ited Liability Company	 _
The enclosed Articles of A	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspon	ndence concerning this matter	to the following:	
	Marian Nemeth		
		Name of Person	·· •
	Just Go Rental	LLC	
		Firm/Company	
	1521 Alton Rd #	† 72	
		Address	
	Miami Beach Fl	33139	
		City/State and Zip Code	
	info@justgoren		<u></u>
T 0 4 1 0 4		to be used for future annual report notifica	illon)
For further information co	oncerning this matter, please c	all:	
Krisztina Nemeth	·	at (305) 308-2824	
Name of	Person		elephone Number
Enclosed is a check for th	e 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

JUST.GO-JET.SKI & BOATS, LLC

(Name of the Limited Liability Compa (A Florida Limited L	ny as it now appears on our records.) iability Company)	
The Articles of Organization for this Limited Liability Company Florida document numberL13000086966	were filed on06/17/2013	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	lity company here:	
Just Go Ren	ital, LLC	
The new name must be distinguishable and end with the words "Limited Liab	ility Company," the designation "LLC" or the	ne abbreviation "L.L.C."
Enter new principal offices address, if applicable:	1521 Alton Rd	
(Principal office address MUST BE A STREET ADDRESS)	72	
	Miami Beach FL 33139	
Enter new mailing address, if applicable:	1521 Alton Rd	•
(Mailing address MAY BE A POST OFFICE BOX)	72	
	Miami Beach FL 33139	
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here Name of New Registered Agent:		er the name of the nev
New Registered Office Address:	Enter Florida street address	
	, Florida	Zip Códe
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as peing filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, and I a provided for in Chapter 605, F.S. (m familiar with and Or, if this document is

Page 1 of 3

If Changing Registered Agent, Signature of New Registered Agent

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

<u> Fitle</u>	Name	Address	Type of Action
			Add
			□ Remove
			Add
			□ Remove
			-
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			□ Remove
· ·			Add &
			□ Remove
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			□ Remove
			Add
			☐ Remove

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e effective d e date this d	ate must be specific, cannot be p ocument is filed by the Florida D 20th March	rior to date of receipt or filed date and cannot be more to epartment of State)	han 90 days after

Page 3 of 3

Filing Fee: \$25.00

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