Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number : (950) 617-6363

From:

Account Name : FASTKIT CORP Account Number : 1201000000009 : (303)399-0839

: (305)592-9591 Fax Number

**Enter the email address for this business entity to be used for fut \(\sqrt{x} \) annual report mailings. Enter only one email address please. **

Email Address:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN RENTEC 1 LLC

Certificate of Status	0
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Corporate Filing Menu

Help EXAMINER

1/16/2019

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

RENTEC 1 LLC						
(Name of the Limited Liability Compan (A Florida Limited Li	y as it now appears ability Company)	on mir records.)				
The Articles of Organization for this Limited Liability Company v	vere filed on	9/22/2018	and assi	and assigned		
Florida document number L18000216057						
This amendment is submitted to amend the following:						
A. If amending name, enter the new name of the limited liabil	ity company her	<u>e</u> :				
The new name must be distinguishable and contain the words 'Limited Liabilit	y Company," the des	signation "LLC" or the	<u></u>	,.C."		
Enter new principal offices address, if applicable:			. =			
(Principal office address MUST BE A STREET ADDRESS)			P. P.			
	<u></u>		<u> </u>			
			<u></u> 子	F 1		
Enter new mailing address, if applicable:	-		<u></u>	<u> </u>		
(Mailing address MAY BE A POST OFFICE BOX)			<u> </u>			
		·				
B. If amending the registered agent and/or registered off	ion addrass on	our records unt	ar the name (of the new		
B. If amending the registered agent and/or registered office address here:	ice address on	our recuras, <u>em</u>	et me name i	n me new		
Name of New Registered Agent:						
New Registered Office Address:						
	Enter Flory	da street address				
		, Florida				
	Ciry		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 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>	Name	Address	Type of Action
MGR	EGO FERGUSON	7051 WEST COMMERCIAL BLVD	
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			□ Add
			□ Romove
			Change 2019 Add Alfa
			Remove Change
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