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COVER LETTER

TO:	Registration Se Division of Con					
SUBJEC		oments Rental Services LLC				
30 MIX	~1·	Name of Limited Liability Company				
The encl	osed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please re	eturn all correspo	ondence concerning this matter	to the following:			
		Kimberly M.				
Name of Person						
		ZenBusiness Inc.				
Firm/Company						
	336 E College Ave. Ste 301					
			Address			
		Talllahasse, FL 32301				
			City/State and Zip Code			
		fulfillment@zenbusiness.co	om to be used for future annual report notifie	estion		
For furth	ner information c	concerning this matter, please ca	·	anvij		
Kimberly C/O ZenBusiness Inc.		ness Inc.	844 4936249 at ()			
•	Name o	of Person	Area Code Daytime T	Felephone Number		
Enclosed	I is a check for t	he following amount:				
■ \$25.	00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
	Mailing Addres Registration		Street Address: Registration Secti	ion		

Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

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 OF

Forever Moments Rental Services LLC			
(Name of the Limited Liability Comps (A Florida Limited	any as it now appears on our records.) Liability Company)		
The Articles of Organization for this Limited Liability Company	were filed on <u>09/29/2022</u>	and assigned	
Florida document number 1.22000422530			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liah	oility company here:		
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" o	or the abbrevation "L.L.C."	
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)		1 -23:	
Enter new mailing address, if applicable:	Po Box 18974	<u> </u>	
(Mailing address MAY BE A POST OFFICE BOX)	Panama City Beach, FL 32407		
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	address on our records, <u>enter th</u>	e name of the new registere	
agent unit/of the new registered office unitess here.			
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street address , Florida		
	City	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>	<u>Name</u>	<u>Address</u>	Type of Action
AMBR	Dexter McKnight	Po Box 18974	
		Panama City Beach, FL 32407	□Remove
			■Change
AMBR	Britney Lewis	Po Box 18974	= Add
		Panama City Beach, FL 32407	□Remove
			Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) E. Effective date, if other than the date of filing: UPON APPROVAL Effective date, if other than the date of filing: (optional) (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m., on the earlier of: (b) The 90th day after the record is filed. December, 21th 2023 Dated /s/ Dexter McKnight Signature of a member or authorized representative of a member Dexter McKnight Typed or printed name of signee