

107 0000 48452

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

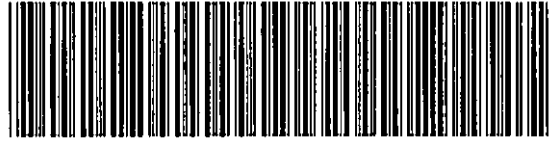
(Document Number)

Certified Copies _____ Certificates of Status ☒

2/12/21

Special Instructions to Filing Officer:

Office Use Only



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12/14/20--01038--013 **35.00

REC

2021 FEB 12 AM 8:06

Amend



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 27, 2021

LAURIE CLEVENGER
RENT ME FLORIDA
517 PAUL MORRIS DRIVE D3
ENGLEWOOD, FL 34223

SUBJECT: RENT ME FLORIDA, LLC
Ref. Number: L07000048452

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The form you submitted is for a Florida profit corporation, but your entity is a Florida limited liability company. Please resubmit on the appropriate form attached.

The registered agent must sign accepting the designation.

The document must be signed by a member or an authorized representative of a member.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Susan Tallent
Regulatory Specialist II

Letter Number: 121A00001862

COVER LETTER

TO: **Registration Section
Division of Corporations**

SUBJECT: Rent Me Florida, LLC

Name of Limited Liability Company

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

Please return all correspondence concerning this matter to the following:

Laurie Clevenger

Name of Person

Rent Me Florida

Firm/Company

517 Paul Morris Drive D3

Address

Englewood, FL 34223

City/State and Zip Code

laurie@rentmeflorida.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Laurie Clevenger

Name of Person

941 474-2882
at ()
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)

on file

Mailing Address:

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

Street Address:

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**

Rent Me Florida, 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 5/7/2007 and assigned
Florida document number L07000048452.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

NA

The new name must be distinguishable and contain 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)

NA

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

NA

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:

Laurie Marie Clevenger

New Registered Office Address:

517 Paul Morris Drive D3

Enter Florida street address

Englewood

City

Florida

34223

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>	<u>Type of Action</u>
MGR	Paula Brill	14140 Tamiami Trail	<input type="checkbox"/> Add
		North Port, FL 34287	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Laurie Marie Clevenger	517 Paul Morris Drive	<input checked="" type="checkbox"/> Add
		D3	<input type="checkbox"/> Remove
		Englewood, FL 34223	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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

NA

[illegible]

E. 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.

Dated February 05, 2021

January 05 2021



Signature of a member or authorized representative of a member

Mary Hank

Typed or printed name of signee

Filing Fee: \$25.00