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(Business Entity Name) (Document Number) Certified Copies Certificates of Status	FIL SECRETARY TALLAHASS
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COVER LETTER



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

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT
ТО
ARTICLES OF ORGANIZATION
OF
Rent Soutions Property Services 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 $2/20/08$ and assigned Florida document number $L0800018038$

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	e designation "LLC" or the abbreviation			
"L.L.C."		2008 TALI			
B. If amending the registered agent and/o	r registered office address on our red	cords, enter HE name of the new			
registered agent and/or the new registered off	<u>ice address here</u> :	AR)			
		E. FLOR			
Name of New Registered Agent:					
		Om t			
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 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.

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

MGR = Ma MGRM = N	nager Aanaging Mo	For ember	Rent Sc	olutions' Moperty Se	envices LLC.
<u>Title</u>	<u>Name</u>			Address	Type of Action
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D. If amen	ding any oth	er informatio	n, enter chang	se(s) here: (Attach additional shee	ts, if necessary.)
Dated	larc	h 31	<u>, 20</u>	008	
			1/Un×	r or authorized representative of a me	

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Filing Fee: \$25.00