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DIVISION OF CORPORATIONS

08 MAY 29 PM 1:55

J. BRYAN

MAY 3 0 2008

**EXAMINER** 

### **COVER LETTER**

TO: Registration Section Division of Corporations	t
SUBJECT: Rent Solutions Property Services LLC (Name of Limited Liability Company)	
The enclosed Articles of Amendment and fee(s) are submitted for filing.	<b>80</b>
Please return all correspondence concerning this matter to the following:	SECRETARY INISION OF C
Steve Oehlerking (Name of Person)	TARY OF STATOF CORPURAT
Mym Solutions, Inc. (Firm/Company)	TIONS TIONS
13014 N. Date Mabry-20	2
Tampa, FL 33618 (City/State and Zip Code)	
For further information concerning this matter, please call:	
Dr. Jorge Trujillo at (813) 476 - 5484  (Area Code & Daytime Telephone Number)	
Enclosed is a check for the following amount:	
\$25.00 Filing Fee  Certificate of Status  Certified Copy (additional copy is enclosed)  \$60.00 Filing Fee, Certificate of Status  Certified Copy (additional copy)	

#### MAILING ADDRESS:

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

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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

The Articles of Organization for this Limited Liability Company were filed on 2/20/8Florida document number LO80000/8038 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 designation "LLC" or the abbreviation "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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: New Registered Office Address: (Enter Florida street address)

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.

(City)

(Zip Code)

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

MGR = Ma MGRM = N	nager Managing Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
<u>S</u>	Steve Ochlerking	13014 North Dale Mabry Swite 202 Tampa FL 33618	Add Remove
<u>S_</u>	Burbara Oehlerking	13014 North Dale Mabri Suite 202 Tampa FL 33618	Add Remove
	<del>-</del>		Add Remove
<u></u>			Add Remove
			Add Remove
			Add Remove
D. If amen	ding any other information, enter change(	s) here: (Attach additional sheets, if necessary.)	
			SECRETARY OF STATE OF VISION OF CORPORATIONS  08 HAY 29 PH 1:55
Dated	May 27, 2008	·	- 55 Tions
	Signature of a member of	Authorized representative of a member	
	Dr. Jorgetr	printed name of signee	

Page 2 of 2

Filing Fee: \$25.00