## #108000073173

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## **COVER LETTER**

TO: Registration Sect Division of Corpo				
•	s Eduipment	RENTAL -		
		bINEERING LL		
		ted Liability Company		
The enclosed Articles of A	mendment and fee(s) are sub	omitted for filing.		
Please return all correspond	dence concerning this matter	to the following:		
		RUBEN PACHECO		
		Name of Person		
	TAXES AND A	CCOUNTING SOLUTI	ONS CORP	
		Firm/Company		
	8249 NW 36 ST SUITE 120 A			
		Address		
	M	IAMI FLORIDA ' ろる	166	
		City/State and Zip Code		
	MAZE	REDO@TASMIAMI.Co to be used for future annual repor	MC . notification)	
For further information cor	ncerning this matter, please o	·	,	
	gg, p.ea	· <del></del> ···		
	N PACHECO	at ( <u>305</u> )	5024904	
Name of I	Person	Area Code & E	aytime Telephone Number	
Enclosed is a check for the	following amount:		•	
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is end	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
	IG ADDRESS:	STREET/CO	DURIER ADDRESS: Section	

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 TO ARTICLES OF ORGANIZATION OF

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ords.)	SOUTH, FLORING	

RENE'S EDUIPMENT RENTALT

MASTER PAUING ENGINEERING UC

(Name of the Limited Liability Company as it now appears on our reco
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on \_\_\_\_\_\_07/30/2008 and assigned L08000073173 Florida document number 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: RUBEN PACHECO Name of New Registered Agent: 8249 NW 36 ST SUITE 120 A 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, Thereby confirm that the limited liability company has been notified in writing of this change.

MIAMI

If Changing Registered Agent, Signature of New Registered Agent

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

MGR = Manager

MGRM = Managing Member <u>Title</u> <u>Name</u> <u>Address</u> **Type of Action** ☐ Add Remove ☐ Add Remove ☐ Add Remove ∏ Add Remove  $\prod Add$ Remove  $\square$ Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated\_ 10 / 15 2012 Signature of a member or authorized representative of a member RENE ANTONIO SANCHEZ Typed or printed name of signee

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Filing Fee: \$25.00