L08000112109

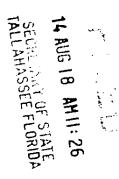
(Requestor's Name)	_
(Address)	-
(Address)	_
(City/State/Zip/Phone #)	_
PICK-UP WAIT MAIL	
(Business Entity Name)	_
(Document Number)	_
Certified Copies Certificates of Status	_
Special Instructions to Filing Officer:	7





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08/18/14--01039--021 **25.00



AUG 2 0 2014 T. HAMPTON

COVER LETTER

TO: Registration Section **Division of Corporations** Rescue Holdings 2 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: Gilbert Fiorentino Name of Person Firm/Company 153 Solano Prado Coral Gables, FL 33156 City/State and Zip Code g@gfiorentino.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: $_{\rm at}(305)987-0770$ Gilbert Fiorentino Daytime Telephone Number Name of Person Enclosed is a check for the following amount:

MAILING ADDRESS:

□ \$30.00 Filing Fee &

Certificate of Status

■ \$25.00 Filing Fee

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

STREET/COURIER ADDRESS:

□ \$60.00 Filing Fee,

Certificate of Status & Certified Copy

(additional copy is enclosed)

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

□ \$55.00 Filing Fee &

Certified Copy

(additional copy is enclosed)

ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION

Rescue Holdings 2 LLC		
(<u>Name of the Limited Liabilit</u> (A Florida	ty Company as it now appears on our red Limited Liability Company)	cords.)
The Articles of Organization for this Limited Liability C	company were filed on 12/08/200	8 and assigned
Florida document number L08000112109	<u>_</u> ·	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limi	ited liability company here:	
Rescue Holdings, LLC		
The new name must be distinguishable and end with the words "Lin	nited Liability Company," the designation	"LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		70 7
(Principal office address MUST BE A STREET ADDR	RESS)	T. Co.
		75 F
		SE SE
Enter new mailing address, if applicable:		F67 =
(Mailing address MAY BE A POST OFFICE BOX)		
		D.
B. If amending the registered agent and/or registered agent and/or the new registered office additional agent.		ords, <u>enter the name of the ne</u>
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street aa	ldress
		, Florida
	City	Zip Code
New Registered Agent's Signature, if changing Registered	d 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

Authorized Member being added or removed from our records: MGR = Manager AMBR = Authorized Member <u>Address</u> **Type of Action Title** <u>Name</u> _□ Add ☐ Remove _□ Add _□ Add □ Remove _□ Add _□ Remove _ Add □ Remove

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or

,	
Effective date, if other than the date of filing:	(optional)
(The effective date must be specific, cannot be prior to date of the date this document is filed by the Florida Department of	of receipt or filed date and cannot be more than 90 days after
Dated August 13	2014
	\bigwedge
Signature of a me	ember or authorized representative of a member
Gilbert Fiorentino	wheel or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

