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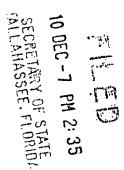
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J. BRYAN

DEC -8 2010

EXAMINER

COVER LETTER

TO: Registration Division of C	Section Corporations	•	
SUBJECT:	YACHTY	RENTALS, LLC	
		ited Liability Company	
The enclosed Articles	of Amendment and fee(s) are su	bmitted for filing.	
Please return all corre	spondence concerning this matte	r to the following:	100 FALL
R		AIMUNDO DE SOUSA	10 DEC -7 PM 2: 35 SECRETARY OF STATE FALLAHASSEE, FLORID
		Name of Person	PH SEE
Y		ACHTY RENTALS, LLC	FS ?
		Firm/Company	25 25
	4	30 CHESTNUT LANE	St.
		Address	
		WESTON, FL 33326	•
		City/State and Zip Code	
	YACHTY	RENTALS@HOTMAIL.COM	
		•	on)
For further information	n concerning this matter, please	call:	
RAIM	UNDO DE SOUSA	at (954) 882	2-0915
Nam	e of Person	Area Code & Daytime Tel	ephone Number
Enclosed is a check for	r the following amount:		
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Regi Divi P.O.	Stration Section sion of Corporations Box 6327 shassee, FL 32314	STREET/COURIER A Registration Section Division of Corporation Clifton Building 2661 Executive Center Tallahassee, FL 32301	ıs

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

YA	CHTY RENTALS, LLC	552 3 10	
(<u>Name of the Limited Li</u> (A F	iability Company as it now appears of lorida Limited Liability Company)	n our records.)	
The Articles of Organization for this Limited Liab Florida document number	pility Company were filed on 04 , 5716	1/3/2009 and assigned	
This amendment is submitted to amend the follow	ring:		
A. If amending name, enter the new name of the	he limited liability company here:		
The new name must be distinguishable and end with t "L.L.C."	the words "Limited Liability Company,"	' the designation "LLC" or the abbreviation	
Enter new principal offices address, if applicab	ele:		
(Principal office address MUST BE A STREET)	ADDRESS)		
Enter new mailing address, if applicable:	4		
(Mailing address MAY BE A POST OFFICE BO	<u></u>		
B. If amending the registered agent and/or registered agent and/or the new registered offic		records, enter the name of the new	
Name of New Registered Agent:			
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

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>	Name	Address	Type of Action					
MGR	STEPHANIE CHIAVERINI	5441 POLK ST. HOLLYWOOD, FL 336	Add Remove					
			Add Remove					
			Add Remove					
	· · · · · · · · · · · · · · · · · · ·		Add Remove					
			Add Remove					
······································			Add Remove					
D. If amendi	ng any other information, enter chang	e(s) here: (Attach additional sheets, if necessary.)	-					
		ALLAH,	10 DE					
<u></u>		ASSEE, T						
Dated	DECEMBER 3 20	10 CORIDE	PH 2: 35					
-	Signature of a member authorized representative of a member							
	RAIMUNDO DE SOUSA							
-	Typed or printed name of signee							

Page 2 of 2

Filing Fee: \$25.00