## L0900043558

(F	Requestor's Name)	
( <i>(</i>	Address)	
(/	ddress)	
(0	ity/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(E	Business Entity Nan	ne)
(C	Ocument Number)	
Certified Copies	Certificates	of Status

Special Instructions to Filing Officer:

L. SELLERS

APR 1.4. 2010

**EXAMINER** 

Office Use Only



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SECRETARY OF STATE TALLAHASSEE, FLORIDA

## **COVER LETTER**

TO: Registration Section Division of Corporations		
SUBJECT: RENTAL AND REALTY GROOP 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:		
ELIZABETH LEVENTHAL Name of Person		
PENTAL AND REALTY GROVE, LIC		
165 PRESTON AVENUE Address		
DAVENPORT, FL, 3383.7 (Tity/State and Zip Code		
rental and real tygray a hot mail con. E-mail address: (to be used of future annual report notification)		
For further information concerning this matter, please call:		
SCOTT LEVENTHAL at (407) 509 - 9934  Name of Person Area Code & Daytime Telephone Number		
Enclosed is a check for the following amount:		
\$25.00 Filing Fee \$\ S30.00 Filing Fee &		

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

STREET/COURIER ADDRESS: Registration Section Division of Corporations Cliffon Building 2661 Executive Center Circle Tallahassee. FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ed 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 MAU 5th, 2009 and assigned Florida document number LO900043558. 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 addr , Florida 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 peree 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

If Changing Registered Agent, Signature of New Registered Agent

company has been notified in writing of this change.

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager Managing Member being added or removed from our records: MCR = Manager MGRM = Managing Member Type of Action Address Tiele Name  $\square$  Add 🔲 🗷 move ☐ Remove Remove D. Mamending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Daniel APRIL

Page 2 of 2

BETH LEVENTHAC
Tyred a printed name of signee

authorized representative of a member

Filing Fee: \$25.06