L12000056740

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
(City/State/Zip/Filone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
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Special Instructions to Filing Officer:					
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97/25/22--91917--021 ++25.00



A. BUTLER OCT 18 2022

COVER LETTER

TO: Registration Section

Division of Cor	porations	•	
SAIA Rent	al LLC	•	,
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	endence concerning this matter	to the following:	
	Alan Sacharoff		
	47	Name of Person	
		Firm/Company	
	200 Diplomat Parkway #7	36	
		Address	
	Haffandale Beach, FL 330		
	Southernbear1950@yahoo.	City/State and Zip Code	
	E-mail address: (to be used for future annual report no	otification)
for further information c	oncerning this matter, please c	all:	
Alan Sacharoff		954 854-7555 at ()	
Name o	f Person	Area Code Dayti	ime Telephone Number
Enclosed is a check for the	ne following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addres		Street Address:	Section
Registration Section Division of Corporations		Registration Section Division of Corporations	
P.O. Box 632	.7	The Centre of	Tallahassee
Tallahassee. I	FL 32314	2415 N. Monr	roe Street, Suite 810

Tallahassee, Fl. 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



SAIA Rental LLC

The Articles of Organization for this Limited Liability Company were filed on $\frac{4/26/2012}{1}$ and assigned Florida document number L12000056740 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 contain 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 City 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 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

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Alberto Ibba	1131 Elysium Blvd	□Add
		Mt. Dora, FL 32757	≣ Remove
			□Change
 		<u> </u>	
			□Remove
			
			□ Add
			□ Remove
			□ Change
			□Remove
			Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change

	
	
	
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Effective date, if other than the date of filing:	
he record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th dord is filed.	ay after the
Dated July 20th 2022. Alan Sacharoff Alan Sacharoff	
ale Socherell	
Signature of a member or authorized representative of a member	
Alan Sacharoff	

. . . .

Filing Fee: \$25.00