L13000009829

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02/11/13--01027--028 **25.00



To whom It may concern,

Please, Add two members to Ansco UC.

If you need any informations

Seel free to contact the at = latteraccomcart.net

786 507 6111

Best.

555 NE, 15th Street-ST€ 200 Miami, FL, 33132.

COVER LETTER

TO: Registration Se Division of Cor			
SUBJECT: A	SCO Rent Name of Limi	ted L Sa bility Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	endence concerning this matter	to the following:	
		Name of Person	
		Firm/Company	
		Address	
	lattes C Co.	City/State and Zip Code City/State and Zip Code Do be used for future annual report notification	· · · · · · · · · · · · · · · · · · ·
For further information of	oncerning this matter, please c		
Name o	f Person	at ()Area Code & Daytime Te	elephone 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 ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED 13 FEB 11 AN 10-39

Ansco Renting	LLC			TOWNER OF STATE
(<u>Name of the Limited Habil</u> (A Florid	a Limited Liab	as it now appears of ility Company)	n our records.	对
The Articles of Organization for this Limited Liability	Company we	ere filed on <u>Jan</u>	Jary 18	20B and assigned
Florida document number <u>L 130000098</u>			1 /	
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the li	mited liabilit	y company here:		
The new name must be distinguishable and end with the w "L.L.C."	vords "Limited	Liability Company,	" the designation	on "LLC" or the abbreviation
Enter new principal offices address, if applicable:	 -			
(Principal office address MUST BE A STREET ADD	<u>DRESS)</u> _			
Enter new mailing address, if applicable:			_	
(Mailing address MAY BE A POST OFFICE BOX)	_			
	_			
B. If amending the registered agent and/or reg	istared office	address on our	records ent	ar the name of the new
registered agent and/or the new registered office ac		addits on our	records, <u>ene</u>	er the name of the new
Name of New Registered Agent:				
Name of New Registered Algent.	·			
New Registered Office Address:				
		Enter	Florida street	address
			, Florida	1
	(City	 -	Zip Code
New Registered Agent's Signature, if changing Registe	red 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 **Title** Name **Address Type of Action** Philippe Cockmartin 60 aux Maurinage Add

Silly en Belgique Remove 7830, Belgium 16R. Tot Robin, Cock martin (Same address.) [Add Remove Remove

If am	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
·d	2/7/2013
	Anny Revol
	Signature of a member or authorized representative of a member
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00