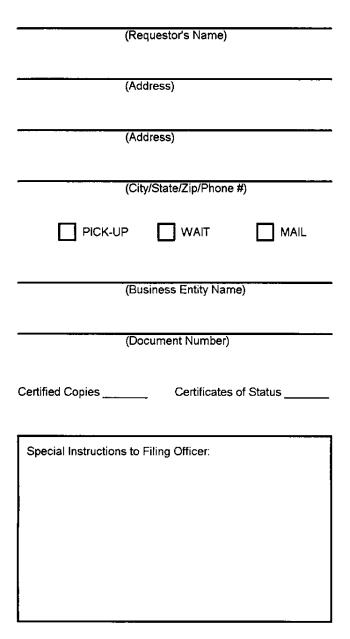
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B. BOSTICK NOV 25 2013

COVER LETTER

TO:	Registrat			÷	•	
SUBJI	ECT:		Ser Rer Name of Limit	Hal, LLC ed Liability Company		
The en	closed Artic	cles of Ar	mendment and fee(s) are sub-	mitted for filing.		
Please	return all co	orrespond	ence concerning this matter	to the following:		
				Amarildo Monsal Name of Person	Je	
				Ser Rental, LLC		
				604 Treehouse SA Address		
				Winder Springs, Fl City/State and Zip Code		
				rrantal e hotmail.com	,	
For fu	rther inform	ation con	E-mail address: (t seerning this matter, please co		on)	2013
		Amo	wildo Monsala	JR at (413) 575 - 492 Area Code & Daytime Te	b	2
Enclos			erson	Area Code & Daytime Te	k lephone Number	2013 NOV 21 PH 12: 3
	5.00 Filing		□\$30.00 Filing Fee & Certificate of Status	□\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□\$60.00 Filing Fee, Certificate of Statu Certified Copy (additional copy is	ns &c

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

Ser Renta	tal, LLC	
(Name of the Limited Liability Company (A Florida Limited Lia	Liability Company)	
The Articles of Organization for this Limited Liability Company w Florida document number	were filed on 10/18/2013 and assigned	
This amendment is submitted to amend the following:	12 12 12 12 12 12 12 12 12 12 12 12 12 1	
A. If amending name, enter the new name of the limited liabili	pility company here:	
The new name must be distinguishable and end with the words "Limited "L.L.C."	ited Liability Company," the designation "LLC" or the abbrevi	 iatior
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)	604 Treehove St. Winter Springs, FL 32708	
B. If amending the registered agent and/or registered office registered agent and/or the new registered office address here:		nev
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, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member **Type of Action Title Name Address** Angelo Monsalve 1065 E. Stake Rd 434 Worter Springs FL 32708 Remove MGRM Ricardo Monsalue 1065 E. Stute Rd 434 Add Noter Sprhys, Fl 30708 Remove Marta I. Monsalue 604 Treehouse St. MERM Winter Springs, F132708 Ĉ Remove Remove Add Remove

		nation, enter change(s) h					
	· Member	changes 3	Malling	Address	Chonel		
• _							
							
_							
_	.,		***************************************				
ed	11/19/2013	, <u></u>	_·				
		0					
	Signature of a member or authorized representative of a member Amarille Monsalve						
	Typed or printed name of signee						
		n -					

Page 3 of 3

Filing Fee: \$25.00

2013 Nov 21 PH 12: 36