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SECRETARY OF STATE TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE Division of Corporations

November 10, 2016

EDOU POLLUS A PLUS CAR RENTAL LLC 3600 SOUTH STATE ROAD 7 STE 44 MIRAMAR, FL 33023

SUBJECT: MB PROPERTY SOLUTIONS LLC

Ref. Number: L15000155560

SEGRETIARY OF STATE TALLAHASSEE, FLORIDA

We have received your document for MB PROPERTY SOLUTIONS LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051./ $\ensuremath{\mathcal{LD}}$

Shelia H Young Regulatory Specialist II

Letter Number: 716A00024230

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

The Articles of Organization for this Limited Liability Co. Florida document number	ompany were filed on 09-11-20 15 and assigned
Florida document number 2 17000 1333 60	NOV 100
This amendment is submitted to amend the following:	TAR PASS
A. If amending name, enter the new name of the limit	tad lightlity company hare:
the first the new name of the first	The state of the s
	2€ ¥ ₩ 🗀
The new name must be distinguishable and contain the words "Limit	ted Liability Company," the designation "LLC" or the abbeatation "L.L.C."
Enter new principal offices address, if applicable:	3600 South State 1277 STE44
(Principal office address MUST BE A STREET ADDRE	ESS) MIRAMAR PL 33023
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	3600 South State 207 STE44 Miramar, FL 33023
B. If amending the registered agent and/or registered agent and/or the new registered office address.	ered office address on our records, <u>enter the name of the new</u> <u>ess here</u> :
Name of New Registered Agent:	ARLON BERROUET
New Registered Office Address: 360	50 South State RD 7 STE 44 Enter Florida street address
_Mi	rames L. Florida 33023 City Zip Code
New Registered Agent's Signature, if changing Registered	Agent:

If Changing Registered Agent, Signature of New 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 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>	<u>Address</u>	Type of Action
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n effect <u>te:</u> If	date, if other than the date of filing:	l) g.) Pursuant to 605	5.(c
recor he 90	d specifies a delayed effective date, but not an effective time, at $12.01 \ a.m$)th day after the record is filed.	. on the earli	er
ted	NOV 7, 2016.		
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Page 3 of 3

Filing Fee: \$25.00