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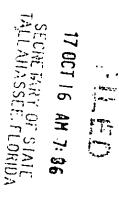
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## **COVER LETTER**

Div	ision of Cor	porations		
SUBJECT:		RENT & SELL SCOOTERS	LLC	
		Name of Lim	ited Liability Company	
The enclosed	l Articles of	Amendment and fee(s) are sub	mitted for filing	
			U	
Please return	all correspo	ndence concerning this matter	to the following:	
		FRANCESCO PALAZZO	,	
		·	Name of Person	<del></del>
		ITALIANS RENT & SEL	LSCOOTERS	
		· · · · · · · · · · · · · · · · · · ·	Firm/Company	
		1059 COLLINS AVE #10	8	
		<del></del>	Address	<del></del>
		MIAMI BEACH FLORID	A 33139	
			City/State and Zip Code	
		francesco.palazzo1979@gn		
		E-mail address: (	to be used for future annual report notifi	ication)
For further in	nformation c	oncerning this matter, please ca	all:	
FRANCESC	O PALAZZ	0	305 9276128	
	Name o	f Person		Telephone Number
Enclosed is a	check for th	ne following amount:		
■ \$25.00 F	iling 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:

TO:

Registration Section

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

## ITALIANS RENT & SELL SCOOTERS LLC (Name of the Limited 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 11/09/15 and assigned Florida document number <u>L15000189632</u> 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 "LLC." 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

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.

New Registered Agent's Signature, if changing Registered Agent:

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person\_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	FRANCESCO PALAZZO	2858 PINE TREE DR # 5	
		MIAMI BEACH 33140	Remove
			Change
MGR	JESSICA LOTZNIKER	2858PINE TREE DR # 5	
		MIAMI BEACH 33140	□ Remove
			Change
MGR	DANILO SIVALLI	2858 PINE TREE DR # 3	
		MIAMI BEACH 33140	■ Remove
			D Change
			☐ Remove
			Change
			□ Remove
			Change
			□ Add
			Remove
			□ Change

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Filing Fee: \$25.00