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COVER LETTER

TO:	Registration of	on Section f Corporations				
SUBJE(Rent C	Cocoa LLC				
SUBJE	(.):	Name of L	imited Liability Company			
The enc	losed Article	es of Amendment and fee(s) are s	ubmitted for filing.			
Please re	eturn all con	respondence concerning this matt	er to the following:			
		Eric Fricker				
			Name of Person			
		Rent Cocoa LLC				
	•	•	Firm/Company			
	137 S Courtenay Pkwy PMB 471					
			Address			
,	City/State and Zip Code					
		RentCocoaLLC@gmail.c	om : (to be used for future annual report n	(Conton)		
For furth	ner informati	ion concerning this matter, please	·	outile activity		
Eric Fri			321 613-8813			
	Na	nme of Person	at () Area Code Dayt	ime Telephone Number		
				ime Telephone Number 77 20		
Enclosed	Lis a check t	for the following amount:		N		
■ \$25.	.00 Filing Fo	ce	S55.00 Filing Fee &	□ \$60.00 Filing Fee: -0 iT		
	•	Certificate of Status	Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy tadditional copy is enclosed		
	Mailing Ad	ldress:	Street Address:			
	_	on Section of Corporations	Registration S Division of C	Section ornorations		

The Centre of Tallahassee

Tallahassee, Ft. 32303

2415 N. Monroe Street, Suite 810

P.O. Box 6327

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Rent Cocoa 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 July 25, 2016 ____ and assigned Florida document number 1.16000138926 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 Florida

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. Thereby 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

Title .	<u>Name</u>	Address	Type of Action
MGR	Kate Fricker	923 Folsom St Apt 112	
		San Francisco, CA 94107	■Remove
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ective date, if other than the date of filing:		_(optional)	
effective date is listed, the date must be specific and cannot be prior to date. If the date inserted in this block does not meet the applicable	te of filing or more than 90 d statutory filing requireme	ays after filing.) Pursunts, this date will n	ant to 605,020 of be listed a
rument's effective date on the Department of State's records.			
cord specifies a delayed effective date, but not an effective time, a stiled.	at 12:01 a.m. on the earlic	er of: (b) The 90th	day after th
ed June 20 2020			
ed June 20 2020			

Filing Fee: \$25.00