# L1600147381

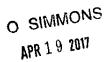
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer: Spoke to Tomasz, charge name to Techsolutions, tech U.C. on 4112111

Office Use Only



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03/23/17--01013--002 \*\*43.75





### FLORIDA DEPARTMENT OF STATE Division of Corporations

March 24, 2017

TOMASZ TOPOLSKI 7966 MOONSTONE DR SARASOTA, FL 34233

SUBJECT: RENTTECHIE LLC Ref. Number: L16000147381

We have received your document for RENTTECHIE LLC and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a FOREIGN PROFIT CORPORATION, but your entity is a LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s).

We are enclosing the proper form(s) with instructions for your convenience.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Octavia I Simmons Regulatory Specialist II

Letter Number: 817A00005729

See the form filled in the back

2017 APR 10 PM 3: L1

### **COVER LETTER**

TO: Registration Se Division of Con			
RENTTEC SUBJECT:	HIE LLC		·
SCHOLECT:	Name of Lim	ited Liability Company	
	Amendment and fee(s) are sub	<u>-</u>	
Please return all correspo	ondence concerning this matter	to the following:	·
	TOMASZ TOPOLSKI		
		Name of Person	
	RENTTECHIE LLC		
	***	Firm/Company	
	7966 MOONSTONE DR		
		Address	
	SARASOTA FL 34233		
	TOOMASH85@GMAIL.C	City/State and Zip Code	
	-	to be used for future annual report notific	cation)
For further information c	oncerning this matter, please ca	all:	
TOMASZ TOPOLSKI		941 8069214	
Name o	f Person	Area Code Daytime	Telephone 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

## **COVER LETTER**

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•	stration Section sion of Corporations	
SUBJECT:	RENTTECHIE LLC	
5000EC1	Name of Limited Liability Company	
The enclosed A	Articles of Amendment and fee(s) are submitted for filing.	
Please return al	all correspondence concerning this matter to the following:	
	TOMASZ TOPUSKI	
SUBJECT: RENTTECHIE LLC  Name of Limited Liability Company  The enclosed Articles of Amendment and fee(s) are submitted for filing.  Please return all correspondence concerning this matter to the following:  TOMRS 2 TOPOLS K 1  Name of Person  RENTTECHIE LUC  Firm/Company  7366 MOONSTONE DR  Address  SHRASOTA FL 34233  City/State and Zip Code  Hoomash 85 @ gmail.com  E-mail address: (to be used for filture Linual report notification)  For further information concerning this matter, please call:  TOMRS 2 TOPOLS K 1  Name of Person  Area Code  Area Code  Daytime Telephone Number  Enclosed is a check for the following amount:  Certificate of Status  Certificate Copy  (additional copy is enclosed)  J're sent check for 43.75 with my previous mail (ettle		
	RENTTECHIE LUC	
	Firm/Company	
	7966 MOONSTONE DR	
	SARASOTA, FL 3423	3
	City/State and Zip Code	
	E-mail address: (to be used for future annual report notification)	
For further info	•	
TOM	1ASZ TOPOLSKI 11(961) 806-921	4
	Name of Person Area Code Daytime Telepho	ne Number
Enclosed is a cl	check for the following amount:	•
	ling Fee □ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □	
	(additional copy is enclosed)	Certified Copy
J're sev	nt check for 43.75 with my previ	ous mail letter
	MAILING ADDRESS: STREET/COURIER ADI Registration Section Registration Section	DRESS:
	Division of Corporations P.O. Box 6327  Division of Corporations Clifton Building	
	Tallahassee, FL 32314 2661 Executive Center Circ	le

Tallahassee, FL 32301

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	ECHIE LEC	· · · · · · · · · · · · · · · · · · ·	
(Name of the Limited Liability (A Florida I	Company as it now appears on our Limited Liability Company)	r records.	
The Articles of Organization for this Limited Liability Co	mpany were filed on <u>08/6</u>	08/2016 and	assigned
Florida document number <u>41600014738</u>	<u>`</u> .	•	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limite	ed liability company here:		
TECHSOLUTIONS	LLC		
The new name must be distinguishable and contain the words "Limite		on "LLC" or the abbreviation	"L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRE	ESS)		3315
			, zu
			2 2
Enter new mailing address, if applicable:		· · · · · · · · · · · · · · · · · · ·	- <del></del>
(Mailing address MAY BE A POST OFFICE BOX)			1.5
			ယ်
B. If amending the registered agent and/or registered agent and/or the new registered office addre		records, <u>enter the nam</u>	ne of the nev
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida stree	t address	
		, Florida Zip Cod	
	City	Zip Coo	de

### 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, 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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = M $AMBR = A$	anager uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add
			Remove
			Change
			□ Add
			Remove
			□ Change-
			Add
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			Remove
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(If an effe	ve date, if other than the date of filing:	5.0207 (3)(I ed as the
the rec ) The	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlie 90th day after the record is filed.	er of:
Dated <sub>.</sub>	· ,	
	/// -/	

Page 3 of 3

Filing Fee: \$25.00