# 16000165899

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### **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: 21 ST CENTURY RENTAL, 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:	
MICHAEL B. BENNETT  Name of Person	
Firm/Company	
9927 INDIAN KEY TRAIL	
SEMINOLE FL 33776  City/State and Zip Code	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
MIGHAEL B. BENNETT at (727) 420-0606  Name of Person Area Code Daytime Telephone Number	_
Enclosed is a check for the following amount:	
\$25.00 Filing Fee Solution Status Solution Status Solution Status Solution Status Solution Status Solution Status Solution Soluti	tatus &

#### 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

_ ZISI CENTORY RENTAL		<del> </del>
(Name of the Limited Liability Compa (A Florida Limited I	i <b>ny as it now appears on our records.</b> ) Liability Company)	
	0/1/	
The Articles of Organization for this Limited Liability Company	were filed on $\underline{Y-U-10}$	and assigned
Florida document number <u>L1600165899</u> .	•	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC" or the abbr	eviation "L.L.C."
	ن ا	2019
Enter new principal offices address, if applicable:	<u> </u>	90CT
(Principal office address MUST BE A STREET ADDRESS)		
	∃:: > 'S	<del>.=</del>
	Gr.	<b>2</b> 10
Enter new mailing address, if applicable:	<u> </u>	œ -
(Mailing address MAY BE A POST OFFICE BOX)		<u>2</u>
		· · · · · · · · · · · · · · · · · · ·
B. If amending the registered agent and/or registered of	ffice address on our records, enter th	ne name of the new
registered agent and/or the new registered office address here		number of the new
Name of New Registered Agent:		
	-	
New Registered Office Address:	Enter Florida street address	
	Fruer 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 provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as publing filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, and I am far provided for in Chapter 605, F.S. Or, if	niliar with and this document is

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 = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	MICHAEL B. BENNETT	9927 INDIAN KEY TRAIL	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
		SEMINALE, FL 33776	Remove
			Change
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If amo	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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lf an efi <u>Note:</u>	ive date, if other than the date of filing:
	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: 90th day after the record is filed.
)ated	SEPTEMBER 26, 2019.
	Signature of a member or authorized representative of a member
	MICHAEL B. BENNETT Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00