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## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: Southern Equipment Source, L. Name of Limited Liability Couppany	LC
The enclosed Articles of Amendment and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Hubert D. Martin	1
Southern Equipment Source	LLC
1050,3 N. Crescent Lane	
Clermont, Florida 34711  City/State and Zip Code  + martin Sec @ amail. com  E-mail address: (to be used for future annual report politication)	
For further information concerning this matter, please call:	
Hubert D. Martin at 353 243 - 8244  Name of Person Area Code Daytime Telephone Number	
Enclosed is a check for the following amount:	
\$25.00 Filing Fee Solution Sol	

### 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

2017 OCT 25 PM 3: 4

Southern Equipment (Name of the Limited Liability Company) (A Florida Limited Liability Company)	ment Scurce was it now appears on our records.) ability Company)	3,45(C" 541
The Articles of Organization for this Limited Liability Company w Florida document number <u>L/6000/8</u> 04	vere filed on <u>69, 37, 30</u> 476	216 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liability  Rent Nation L  The new name must be distinguishable and contain the words "Limited Liability	_LC	abbreviation "L.L.C."
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	Same	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	same	
B. If amending the registered agent and/or registered offi registered agent and/or the new registered office address here:		er the name of the new
Name of New Registered Agent:  New Registered Office Address:	same	
	Enter 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 p accept the obligations of my position as registered agent as pr being filed to merely reflect a change in the registered office a company has been notified in writing of this change.	erformance of my duties, and I an ovided for in Chapter 605, F.S. C	n familiar with and or, if this document is

If Changing Registered Agent, Signature of New Registered Agent

or removed from our records: MGR = Manager AMBR = Authorized Member Type of Action <u>Address</u> Title Name □ Add \_□ Remove ☐ Change □ Add □ Remove 🗅 🗃 nge \_□ Remov Change □ Add \_□ Remove ☐ Change □ Add \_□ Remove \_ Change ☐ Add ☐ Remove <u> □</u> Change

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added

Effective date, if other than the date of filing: Such Such Such Such Such Such Such Such	<del></del>	/	-
Effective date, if other than the date of filing:  October 24, 2017 optional)  fan effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3M Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.  The 90th day after the record is filed.  Signature of a member or authorized representative of a member.	N	/A	-
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Filing Fee: \$25.00