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COVER LETTER

TO: Registration So Division of Cor		•	
SAN REN' SUBJECT:	TIER LLC		
	Name of Lim	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub		
Please return all correspo	ondence concerning this matter	to the following:	
	Silviu Antonescu		
	SAN RENTIER LLC	Name of Person	
		Firm/Company	······································
	540 Brickell Key Drive, A	pt 1108	
		Address	
	Miami, FL 33131		
	 	City/State and Zip Code	
	silviu.antonescu@gmail.com	m to be used for future annual report notifi	- Alexander - Alex
For further information of	concerning this matter, please co	•	cation)
Silviu Antonescu		786 901-1398	
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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

F	ILED
- "JAN I	' ¬
SEURETAS	7 PM 2: 43
THASSE	PM 2: 43 TOF STATE E. FLORIDA

SAN RENTIER 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 12/19/2016 and assigned Florida document number L16000228910 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 "L.L.C." 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, I hereby confirm that the limited liability company has been notified in writing of this change.

City

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

Title	Name	Address	Type of Action
MGRM	Silviu Antonescu	540 Brickell Key Drive	
		Apt 1108	□ Remove
		Miami, FL 33131	■ Change
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fective date, if other than the date in effective date is listed, the date must be spate: If the date inserted in this block discurrent's effective date on the Department's	ecific and cannot be prior to sees not meet the applica	to date of filing or mo	ore than 90 days afte	ional) r filing.) Pursuant to 605.020 is date will not be listed a
record specifies a delayed effe The 90th day after the record i		an effective ti	me, at 12:01	a.m. on the earlier (
January 10	2017			
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	ture of a member or autho			

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Filing Fee: \$25.00