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CORPORATE ACCESS, ____

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WALK IN

PICK	UP: 10/23/18
CERTIFIED COPY PHOTOCOPY	
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FILING	AMENDMENTS
PF RENTAL DEVELOPM	
(CORPORATE NAME AND DOCUM	ENT#)
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COVER LETTER

	Registration Sec Division of Corp			
SUBJEC		L DEVELOPMENT, LLC		
ODJEC		Name of Limi	ited Liability Company	
		Amendment and fee(s) are sub-	-	
	·	SHARON ROZENCWAIO	-	
			Name of Person	
		ROZENCWAIG & NADE	L. LLP	
			Firm Company	
		301 W. HALLANDALE B	EACH BLVD	
			Address	
		HALLANDALE/FLORID	OA/ 33009	
		entities@rnflaw.com	City/State and Zip Code	
		E-mail address: (t	o be used for future annual report notifi-	cation)
For furth	er information co	ncerning this matter, please ca	di:	
SHARON ROZENCWAIG		954 455-5100 at ()		
	Name of	Person	at () Area Code Daytime	Telephone Number
Enclosed	is a check for the	e following amount:		
\$25.0	0 Filing Fee	S30.00 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 OF

PF RENTAL DEVELOPMENT, 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 2/15/2017 and assigned Florida document number __ L17000036518 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." 1205 S. 21ST AVE Enter new principal offices address, if applicable: HOLLYWOOD, FL 33020 (Principal office address MUST BE A STREET ADDRESS) 1205 S, 21ST AVE Enter new mailing address, if applicable: HOLLYWOOD, FL 33020 (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:

New Registered Agent's Signature, if changing Registered Agent:

Name of New Registered Agent:

New Registered Office Address:

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 cocument is being filed to merely reflect a change in the registered office address. I hereby confirm that the limited liebility company has been notified in writing of this change.

City

If Changing Registered Agent, Signature of New Registered Agent

Enter Florida street address

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	<u>Address</u>	Type of Action
MGR	KOEN, RONNY	3847 PEMBROKE ROAD	
		HOLLYWOOD, FL 33021	Li Aud
			■ Remove
			□ Change
MGR	DICHI, JOEL	1205 S. 21ST AVE	5.11
		HOLLYWOOD, FL 33020	□ Add
			☐ Remove
			■ Change
MGR	LEVY DE DICHI, LINDA	1205 S. 21ST AVE	
		HOLLYWOOD, FL 33020	
			☐ Remove
			🖺 Change
MGR	FERRER, PATRICIA	1205 S. 21ST AVE	
		HOLLYWOOD, FL 33020	∆dd
			□ Remove
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n effect	re date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Fursuant to 605 he date inserted in this block does not meet the applicable statutory filing requirements, this date with not be listed.	020. مام
	s effective date on the Department of State's records.	đ
	Som 3	7
reco	specifies a delayed effective date, but not an effective time, at 12:01 a.m. sinche exilie	er c
The 9	th day after the record is filed. 무취 교	
	Ochly, 24 2018	
ted	1 1 1 7 \	
	July Claul	
	Signature of a member or authorized representative of a member	
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Filing Fee: \$25.00