L17000083 190

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C. GOLDEN AUG 1 3 2019

COVER LETTER

	egistration Section ivision of Corporations							
SUBJEC [*]	Sonco Land LLC							
SUBJEC	1:	Name of Lin	nited Liability Company					
The enclo	sed Articles of	Amendment and fee(s) are sub	omitted for filing.					
Please reti	urn all correspo	ondence concerning this matter	to the following:					
		Robert Krueger						
			Name of Person					
		Sonco Land LLC						
			Firm/Company					
		1022 Skipper Road						
			Address					
		Tampa, FL 33613						
		ap@rentalex.com	City/State and Zip Code					
		E-mail address: (to be used for future annual report notil	ication}				
For further	r information c	oncerning this matter, please co	all:					
Robert Kr	पाट्टटा		813 781-6841 at ()					
	Name o	f Person	Area Code Daytime	Telephone Number				
Enclosed i	s a check for th	ne following amount:						
S25.00) 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:

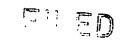
TO:

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



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Sonco Land 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 04/13/2017 and assign Florida document number L17000083190 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)
Florida document number L17000083190 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]
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 "LLC. 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]
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LEC" or the abbreviation "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)
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)
Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BOX)
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)
(Mailing address MAY BE A POST OFFICE BOX)
3. If amending the registered agent and/or registered office address on our records, enter the name of
registered agent and/or the new registered office address here:
Name of New Registered Agent:
New Registered Office Address: Enter Florida street address
Enter Florida street address

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 = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Robert Krueger	1022 Skipper Road Tampa, FL 33613	■ Add
			□ Remove
	Lofferma Kompanya	1022 Cl.: D 1	
MGR	Jeffery Krueger	1022 Skipper Road Tampa, FL 33613	■ Add
			☐ Remove
Man	Thomas W. Krueger		☐ Change
MGR		1072 SL' D 1	Add
		1022 Skipper Road Tampa, FL 33613	■ Remove
			☐ Change
			□ Remove
			Change
			☐ Remove
			☐ Change
			Add
			🗖 Remove
			Change

					
					
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Effective date, if of	her than the date of	filing:	L. car	(optional)	
Note. If the date this	erted in this block does date on the Departmen	s not meet the applica	ble statutory filing re	han 90 days after filing.) Purs quirements, this date will t	not be listed as
ne record specifie The 90th day at	s a delayed effect ter the record is f	ive date, but not iled.	an effective time	e, at 12:01 a.m. on t	he earlier of
Dated August 5		2019			
			<u> </u>		
I #1	1 N 1				

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Typed or printed name of signee

Filing Fee: \$25.00