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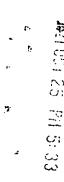
(R	Requestor's Name)	
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PICK-UP	WAIT	MAIL
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Certified Copies	Certificates of	Status
		
Special Instructions to	o Filing Officer:	
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Office Use Only



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COVER LETTER

Registration Section

TO:

Division of	Corporations		
SUBJECT:	RENTRAIL, LLC	•	• · · · · · · · · · · · · · · · · · · ·
SOMECT:	Name of Lin	nited Liability Company	
The enclosed Articles	of Amendment and fee(s) are sub	omitted for filing.	
Please return all corre	espondence concerning this matter	to the following:	
	MIRIAM MEDINA		
		Name of Person	
		Firm/Company	
	19380 COLLINS AVE. A	PT 1405	
		Address	
	SUNNY ISLES BEACH,	FL 33160	
air.	-	City/State and Zip Code	
-	miriam2004medina@yahoo	o.com to be used for future annual report no	
✓ For further informatic	on concerning this matter, please c		incation)
	in concerning this matter, prease c		
MIRIAM MEDINA		305 343-9990 at ()	
Nan	ne of Person	Area Code Daytir	ne Telephone Number
Enclosed is a check fo	or the 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)
P.O. Box 6	n Section f Corporations	Street Address: Registration Se Division of Co The Centre of 2415 N. Monro	rporations

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

			1021 011 25 PH 5: 33
RENTRAIL, LLC			
(Name of the Lim	ted Liability Compa (A Florida Limited	nny as it now appears on our reco Liability Company)	rds.)
ne Articles of Organization for this Limited L	Liability Company	were filed on 06/13/2017	and assigned
orida document number L17000128625	<u> </u>		
nis amendment is submitted to amend the fol	lowing:		
. If amending name, enter the new name o	of the limited <u>liah</u>	ility company here:	
ne new name must be distinguishable and contain the	words "Limited Liabi	iity Company," the designation "Ll	.C" or the abbreviation "L.L.C."
nter new principal offices address, if appli-	cable:	19700 SW 128 AVE	
Principal office address MUST BE A STREET ADDRESS)		MIAMI, FL 33177	
nter new mailing address, if applicable:		SAME AS ABOVE	
Aailing address MAY BE A POST OFFICE	(BOX)		
 If amending the registered agent and/or gent and/or the new registered office addresses. 	registered office : ess here:	address on our records, <u>ente</u>	er the name of the new regist
	<u></u>		
Name of New Registered Agent:	CESAR GARC	ZIA	
New Registered Office Address:	19700 SW 128	AVE	
		Enter Florida street addr	ess
	MIAMI	F	Florida <u>33177</u>
		Cin	Zip Code

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.

ranging 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	MIRIAM MEDINA	19557 NW 50 CT	
		MIAMI GARDENS, FL 33055	■Remove
			□ Change
MGR	RICARD G. GARCIA FURTADO	19700 SW 128 AVE	≣ Add
		MIAMI, FL 33177	□Remove
			□Change
MGR CESAR GARCIA	CESAR GARCIA	19700 SW 128 AVE	≣ Add
		MIAMI, FL 33177	□ Remove
			□ Change
			□Add
			Remove
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7.00 .1 . 1.0 .10 .1 .41	- Al doAo of 6:1:	10/20/2021		(optio	nal)	
Effective date, if other that If an effective date is listed, the da Note: If the date inserted in the document's effective date on	te must be specific a his block does not	ind cannot be prior to t meet the applicab	date of filing or more ble statutory filing t	e than 90 days after f	iling.) Pursuant to 605	5.0207 (£ ed as th
e record specifies a delayed ef rd is filed.	fective date, but n	ot an effective tim	ie, at 12:01 a.m. on	the earlier of: (b)	The 90th day afte	er the
Dated OCTOBER 20	//	2021	_·			
B	_//					
	Signature of	a member or author	ized representative o	f a member		

Typed or printed name of signee