PAGE 01/03

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	Fax Nu	mper	: (561)69	4-1639		
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ARTICLE J - Name:		<u>+</u>		•		•
The name of the Limited Lia	ability Company is:		s.			
.•						
RTR Next Gen S	Sales, LLC					
(Must	contain the words "Limite	d Liability Company,	"L.L.C.," or "LLC.")			
ARTICLE II - Address:						
The mailing address and stre	ect address of the principal	office of the Limited	Liability Company is:			
	ncipal Office Address:		Mailing Address:			
11690 N.W. 105	th Street All					
Miami, Florida	33178-1103					
ARTICLE III - Registered	Agent, Registered Office	e, & Registered Agen	t's Signature:	ALL	17	
ARTICLE III - Registered The Limited Liability Comp mother business entity with	Agent, Registered Office Dany cannot serve as its ow an active Florida registrati	m Registered Agent, Y ion.)	t's Signature: 'ou must designate an individual o	HAA	17 AUG - 2	
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ARTICLE III - Registered	Agent, Registered Office oany cannot serve as its ow an active Florida registrati reet address of the registere <u>Robert D. Fatovic</u> <u>11690 N.W. 105th 5</u>	m Registered Agent, Y ion.) ed agent are: Name Street - 4W	'ou must designate an individual o	ETANY OF	-2 AH 9:3	

further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position or registered agent as provided for in Chapter 605, F.S.

(CONTINUED)

Registered Agent's Signature (REQUIRED)

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ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Uability Company:

Title: "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager AMBR	Ryder Truck Rental, Inc. 11690 N.W. 105th Street - 4W
	Miami, Florida 33178-1103

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: ______. (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

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.

ARTICLE VI: Other provisions, if any.

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<u>REOUTREI</u>	2SIGNATURE:
	Signature of a member or an authorized representative of a member. This document is executed in accordance with section 605.0203 (1) (b). Florida Statutes, I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.
	Robert D. Fatovic
	Typed or printed name of signee
	Filing Fees:

\$ 5.00 Certificate of Status (Optional)