

L17000168807

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

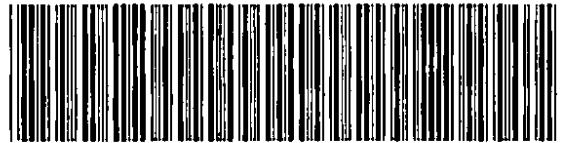
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800355946808

12/07/20--01013--014 **25.00

2020 DEC -7 AM 9:13
SECRETARY OF STATE
DIVISION OF CORPORATIONS
& BUSINESSES

LAH
1/20/21

Detail by Entity Name

Florida Limited Liability Company

4 RENT GROUP LLC

Filing Information

Document Number L17000168807

FEI/EIN Number 35-2603191

Date Filed 08/08/2017

Effective Date 08/08/2017

State FL

Status ACTIVE

Principal Address

2501 S OCEAN DRIVE
SUITE 105
HOLLYWOOD, FL 33019

Mailing Address

2501 S OCEAN DRIVE
SUITE 105
HOLLYWOOD, FL 33019

Registered Agent Name & Address

LOBA INVESTMENT GROUP INC
2501 S OCEAN DRIVE
SUITE 105
HOLLYWOOD, FL 33019

Authorized Person(s) Detail

Name & Address

Title AMBR

VAZQUEZ, MABEL E
2501 S OCEAN DRIVE SUITE 105
HOLLYWOOD, FL 33019

Annual Reports

Report Year	Filed Date
2018	03/20/2018
2019	04/18/2019
2020	05/26/2020

Document Images

<u>05-26-2020 -- ANNUAL REPORT</u>	View image in PDF format
<u>04-18-2019 -- ANNUAL REPORT</u>	View image in PDF format
<u>03-20-2018 -- ANNUAL REPORT</u>	View image in PDF format
<u>08-08-2017 -- Florida Limited Liability</u>	View image in PDF format

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 4 RENT GROUP LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

MABEL VAZQUEZ

Name of Person

Firm/Company

17121 COLLINS AV

Address

SUNNY ISLES , FLORIDA , 33160

City/State and Zip Code

mabelevazquez@hotmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MABEL VAZQUEZ

305 747-5568
at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for 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)

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

4 RENT GROUP 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 08/08/2017 and assigned
Florida document number L17000168807.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

N/A

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)

17121 COLLINS AV

UNIT 2302

SUNNY ISLES BEACH, FL 33160

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

17121 COLLINS AV

UNIT 2302

SUNNY ISLES BEACH, FL 33160

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:

MABEL VAZQUEZ

New Registered Office Address:

17121 COLLINS AV, UNIT 2302

Enter Florida street address.

SUNNY ISLES BEACH


City

Florida 33160

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.


If Changing Registered Agent, Signature of New Registered Agent

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
<hr/>	<hr/>	<hr/>	<input type="checkbox"/> Add
		<hr/>	<input type="checkbox"/> Remove
		<hr/>	<input type="checkbox"/> Change
<hr/>	<hr/>	<hr/>	<input type="checkbox"/> Add
		<hr/>	<input type="checkbox"/> Remove
		<hr/>	<input type="checkbox"/> Change
<hr/>	<hr/>	<hr/>	<input type="checkbox"/> Add
		<hr/>	<input type="checkbox"/> Remove
		<hr/>	<input type="checkbox"/> Change
<hr/>	<hr/>	<hr/>	<input type="checkbox"/> Add
		<hr/>	<input type="checkbox"/> Remove
		<hr/>	<input type="checkbox"/> Change
<hr/>	<hr/>	<hr/>	<input type="checkbox"/> Add
		<hr/>	<input type="checkbox"/> Remove
		<hr/>	<input type="checkbox"/> Change
<hr/>	<hr/>	<hr/>	<input type="checkbox"/> Add
		<hr/>	<input type="checkbox"/> Remove
		<hr/>	<input type="checkbox"/> Change

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed

Signature of a member or authorized representative of a member

Typed or printed name of signee

Filing Fee: \$25.00