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# **COVER LETTER**

то:	Registration Sec Division of Corp		e e		
SUBJI	ECT:	Valation Rent	CUS ASSOCIATION, ited Liability Company	UC	
The en	closed Articles of A	Amendment and fee(s) are sub	mitted for filing.		
Please	return all correspor	ndence concerning this matter	to the following:		
		<u>D</u> ,	are Ritter Name of Person	<del></del>	
			Firm/Company		7
		<u> 535 (</u>	Old BeechCt		
		Centro	Address  Ville DH 454  City/State and Zip Code	58 3 3	ij
		dritter 3 E-mail address: (	5@ hormail cor	Cation)	
For fu	ther information co	oncerning this matter, please ca	all:		
	Diane of	Person	at ( <u>937</u> ) <u>238</u> Area Code Daytime	Y4370 Telephone Number	
Enclos	ed s a check for the	e following amount:			
€ \$2	5.00 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/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Maitur Berta Name of the Limited	Liability Company as it now appears on o	ur records.)	
The Articles of Organization for this Limited Liab	ility Company were filed on _5 1	110	and assigned
This amendment is submitted to amend the follow	ing:		
A. If amending name, enter the new name of the new name must be distinguishable and contain the word	ion Rentals Assoc	1/1-1/4) UC	ation "L.L.C."
Enter new principal offices address, if applicable	le:		
Principal office address MUST BE A STREET	ADDRESS)		
		7	5) 5)
Enter new mailing address, if applicable:	ble:  ADDRESS)  OX)		
Mailing address MAY BE A POST OFFICE BO  B. If amending the registered agent and/or		records enter the	S D
registered agent and/or the new registered offic		records, ener the	'7)
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida str		
-	City	, Florida 	ip 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

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
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			☐ Remove
			Change
			Add
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Effective date, if other than the date of filing:    Compared to the compared	
Effective date, if other than the date of filing:	
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Effective date, if other than the date of filing:  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 Note:  If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be	1
Effective date, if other than the date of filing:  f 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 Note:  If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be	•
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	to 605,0207 e listed as
e record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the e The 90th day after the record is filed.	earlier o
Dated 5/15/17 . 2018.	
Dan Riter	
Signature of a member or authorized representative of a member  Drane RIHEV	

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00