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## **COVER LETTER**

TO:	Registration Se Division of Cor			
		Rentals LLC		
SUBJE	SCI:	Name of Limi	ited Liability Company	
The en	closed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Picase	return all correspo	ndence concerning this matter	to the following:	
		Kevin Pippin		
		<del></del>	Name of Person	<del></del>
		Rhino Party Rentals LLC		
			Firm/Company	•
		206 S Old Coachman Road	1	
			Address	
		Clearwater, Florida 33765		
		rhinopartyrentals@gmail.co	City/State and Zip Code om	
		E-mail address: (	to be used for future annual report notifi	cation)
For fur	rther information o	concerning this matter, please co	all:	
Kevin	Pippin		727 415-8656 at ()	
	Name o	f Person	Area Code Daytime	Telephone Number
Enclos	sed is a check for t	he 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:

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

Rhino Party Rentals LLC					
(Name of the Lim	ited Liability Compa (A Florida Limited I	ny as it now appears on our records. Liability Company)	)		
he Articles of Organization for this Limited I lorida document number L18000157921	Liability Company	were filed on June 27th 2018	and assigned		
If amending name, enter the new name of the limited liability company here:  new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."  ter new principal offices address, if applicable:  incipal office address MUST BE A STREET ADDRESS)  Ter new mailing address, if applicable:  206 S Old Coachman Road  Clearwater, Florida 33765  Clearwater Florida 33765					
. If amending name, enter the new name	of the limited liab	ility company here:			
he new name must be distinguishable and contain the	words "Limited Liabi	lity 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)		206 S Old Coachman Road			
		Clearwater, Florida 33765			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)					
. If amending the registered agent and egistered agent and/or the new registered of			enter the name of the		
Name of New Registered Agent:	Kevin Pippin		43 S F		
New Registered Office Address:	206 S Old Coad		59 <b>5</b> 0		
	Clearwater	Enter Florida street address	rida <sup>33765</sup>		
			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

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>	<u>Address</u>	Type of Action
MGR	Caleb Lane	1420 Oak Haven Drive Safety Harbor, Florida 34695	
			■ Remove
			Change
MGR	Kevin Pippin	206 S Old Coachman Road Clearwater, Florida 33765	■ Add
			Remove
			☐ Change
			Add
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ctive date, if other than the da	ate of filing:			(optional)			
effective date is listed, the date must b	e specific and cannot b	e prior to date of fi	ling or more than 90	days after filing.			
e: If the date inserted in this block iment's effective date on the Department.			ory ming requirer	nents, this date	WIII DO	t be ns	tea
ecord specifies a delayed enter the recor		ut not an effe	ctive time, at	12:01 a.m.	on the	e earli	ier
July 3rd	2019	<u></u> .					
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Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00