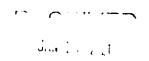
L18000193057

(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
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FILED 2021 JAN 19 AHTH: 26

2/23/21

COVER LETTER

Registration Section Division of Corporations

Tallahassee, FL 32314

TO:

BI SUBJECT:	.UE RENT	TAL.LLG	,	·
SOBJECT:		Name of Lim	ited Liability Company	
The enclosed Ar	ticles of A	mendment and fee(s) are sub	mitted for filing.	
Please return all	correspon	dence concerning this matter	to the following:	
		ZI WANG		
			Name of Person	
			Firm/Company	
		10800 Cherry Oak Cir		
			Address	
		Orlando,FL 32817		
		serenawang1985@yahoo.co	City/State and Zip Code	
		· · ·	to be used for future annual report noti	fication)
For further infor	mation co	ncerning this matter, please ca	ıll:	
serena wang			407 4540564 at ()	
	Name of I	Person	Area Code Daytim	e Telephone Number
Enclosed is a ch	eck for the	following amount:		
≘ \$25.00 Filin	g Fec	□ \$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)
	Address:		Street Address: Registration Sec	ction
Divisi	on of Co	rporations	Division of Cor	porations
P.O. E	3ox 6327		The Centre of T	Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BLUE RENTAL,LLC	
(<u>Name of the Limited Liability Company as it now ap</u> (A Florida Limited Liability Compa	pears on our records.) ny)
The Articles of Organization for this Limited Liability Company were filed on Florida document number $\frac{L18000193057}{L18000193057}$.	08/13/2018 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability compan	<u>v here</u> ;
BLUE RENTAL LLC	
The new name must be distinguishable and contain the words "Limited Liability Company," t	the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
Principal office address MUST BE A STREET ADDRESS)	20
	21 J
	是 卫
'-4	19
Enter new mailing address, if applicable:	
Mailing address MAY BE A POST OFFICE BOX)	
	ひ
3. If amending the registered agent and/or registered office address on ou	ir records, <u>enter the name of the new regist</u>
gent and/or the new registered office address here:	
Name of New Registered Agent:	
New Registered Office Address:	
	Florida street address
	, Florida
City	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>	Address	Type of Action
			□Add
			□Remove
			□Change
			□Add
			Remove
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			Change 2021
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Fective date, if other than the neffective date is listed, the date mote: If the date inserted in this cument's effective date on the	block does not meet the applicable statutory	(optional) g or more than 90 days after filing.) Pursuant to 605.020 y filing requirements, this date will not be listed a
ecord specifies a delayed effect is filed.	ive date, but not an effective time, at 12:01	a.m. on the earlier of: (b) The 90th day after th
ted	. 2021	
	11 - 1	
1	Signature of a member or authorized represer	