48000216724

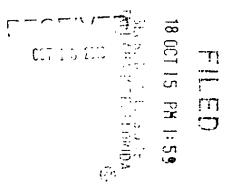
(Requ	estor's Name)
(Addre	ess)	
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(City/S	state/Zip/Phor	ne #)
PICK-UP	MAIT	MAIL
(Busin	ess Entity Na	nme)
(Docu	ment Number	r)
Certified Copies	Certificate	es of Status
Special Instructions to Fili	ng Officer:	





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COVER LETTER

то:	Registration Sec Division of Cor			
SUBJE	·CT·	RENE	ENT, LLC	
50001		Name of Limi	ited Liability Company	
The end	closed Articles of a	Amendment and fee(s) are sub-	mitted for filing.	
Please 1	return all correspo	ndence concerning this matter	to the following:	
			JON BINKOWSKI	
			Name of Person	
			RENENT, LLC	
			Firm/Company	
		825	VERANDA PLACE	
			Address	
		Ce	lebration, FL 34	1747
			City/State and Zip Code	
			jon@ren-ent.com to be used for future annual re	enort notification)
For furt	ther information co	oncerning this matter, please ca		,
	JON BIN	IKOWSKI	at (4074,35-	7551
		f Person	Area Code	Daytime Telephone Number
Enclose	ed is a check for th	ne following amount:		
□ \$25	5.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status &
	Registr Divisio P.O. Bo	ING ADDRESS; ation Section on of Corporations ox 6327 assec, FL 32314	Registration of Clifton Bu	of Corporations

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

RENENT, LLC			
(<u>Name of the Limited Liability Company</u> (A Florida Limited Lia	as it now appears ibility Company)	on our records.)	
The Articles of Organization for this Limited Liability Company w	ere filed on	09/12/2018	and assigned
Florida document number <u>L18000216724</u> .			
his amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabili	ity company her	<u>re</u> :	
N/A			
he new name must be distinguishable and contain the words "Limited Liability"	y Company," the de	signation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:	JON	BINKOWSKI	
Principal office address MUST BE A STREET ADDRESS)	825	VERANDA PLA	CE
	Celeb	ration, FL 347	47
Enter new mailing address, if applicable:		N/A	18 00 7
Mailing address MAY BE A POST OFFICE BOX)			7 T
3. If amending the registered agent and/or registered offi registered agent and/or the new registered office address here:		our records, ente	'
		,	
Name of New Registered Agent:			
New Registered Office Address:	Enter Flori	da street address	
	20000		
	Civ	, Florida _	Zin 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
MGR	JON BINKOWSKI	825 VERANDA PLACE CELEBRATION, FL 34747	⊠ Add
			☐ Remove
			☐ Change
MGR	Melissa E Smith		
			☑ Remove
		<u> </u>	☐ Change
			Seld Fremove
		-1111111111111	P Change
			☐ Add
			Change
			Remove
			Change
			Remove
			☐ Change

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ffective	date, if other than the date of filing: 09/12/2018 (option	ıal)	
fan effecti	ive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after fithe date inserted in this block does not meet the applicable statutory filing requirements, this d	ling.) Pursuant to 60	
	i's effective date on the Department of State's records.	ate will not be its	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	d specifies a delayed effective date, but not an effective time, at 12:01 a.	m. on the earl	lier o
The 90	Oth day after the record is filed.		
	OCTOBER 4th 2018		
Dated	OCTOBER 4th 2018		
	Signature of a member or authorized representative of a member		
	Signature of a member or authorized representative of a member JON BINKIWSKI		

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Filing Fee: \$25.00