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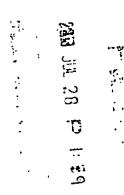
(Requestor's Name)
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COVER LETTER

Div	ision of Cor	porations		
SUBJECT:		ls Orlando, L.L.C.		
		Name of Lin	nited Liability Company	<u> </u>
The enclosed	l Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return	all correspo	ndence concerning this matter	to the following:	
		Julian Luciano		
			Name of Person	
		LAS Rental Orlando		
			Firm/Company	
		1312 epson oaks way		
			Address	
		Orlando, Florida 32837		
		las.rental.orlando@gmail.co	City/State and Zip Code	
		E-mail address: (to be used for future annual report notif	ication)
For further in	nformation co	oncerning this matter, please ca	all:	
Julian Luciai	10		787 918-2822 at ()	
	Name of	Person	Area Code Daytime	: Telephone Number
Enclosed is a	check for th	e following amount:		
■ \$ 25.00 F	iling 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

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

TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Company as it now appears on our records.)

Las Rental Orlando, LLC

(A Florida Limited Lia	bility Company)	229 JUL 28 F	D 1: 39
The Articles of Organization for this Limited Liability Company w	ere filed on May 8th	2019	and assign
The Articles of Organization for this Limited Liability Company w Florida document number $\frac{1.19000125020}{1.19000125020}$		The Carrier	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabili	ty company here:		
The new name must be distinguishable and contain the words "Limited Liability	Company," the designa	ation "LLC" or the abl	previation "L.L.C
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)			
			
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
(Mailing agartss MAT DE AT OST OFFICE BOX)		<u> </u>	
		 _	
B. If amending the registered agent and/or registered office registered agent and/or the new registered office address here:	ce address on our	records, <u>enter</u> (the name of t
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida sti	reet address	
		, Florida	<u> </u>
	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 we provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with an accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document 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

or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of A
AMBR	Julian Luciano	1312 epson oaks way, orlando fl 32837	
		32037	Add
			Change
AMBR	Manuel Sesto Rodriguez		
		1312 epson oaks way, orlando fl 32837	■ Change
AMBR	Bryan Aldarondo		
		3857 Wind Dancer Cir, Saint	Remove
		Cloud FL 34772	
			□ Remove
		- <u></u>	Change
			□ Remove
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			□ Remove
			Change

				
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	May 8th	ı, 2019		
Tective date, if other than the da an effective date is listed, the date must be	te of filing:	prior to date of filing or	(optiona more than 90 days after filic	l) ig.) Pursuant to 60
ote: If the date inserted in this block ocument's effective date on the Depa	does not meet the ap	plicable statutory fil-	ng requirements, this da	te will not be lis
record specifies a delayed el The 90th day after the record		not an effective	time, at 12:01 a.m	. on the earl
ated May 8th, 2019	- 8:00	· ·		
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Page 3 of 3

Filing Fee: \$25.00