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COVER LETTER

TO:

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CUDIECT.	RENT-A-R					
SUBJECT:	 .		ited Liability Compar	ny		-
The enclosed	l Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return	all correspo	ondence concerning this matter	to the following:			
		LOVETTE DOBSON				
			Name of Perso	on		_
		INCFILE.COM LLC				
			Firm/Compan	y		
		17350 STATE HWY 249	STE 220			
			Address			_
		HOUSTON, TX 77064				
			City/State and Zip	Code		_
		EFILE1234@INCFILE.CO				_
For further in	oformation o	E-mail address: (oncerning this matter, please co	to be used for future a	innual report noti	ification)	
LOVETTE (855	829-9090		
	Name o	f Person	at (Area Cod	_) e Daytim	ne Telephone Numb	er
Enclosed is a	check for th	ne following amount:				
≡ \$ 25.00 F	iling Fee	S30.00 Filing Fee & Certificate of Status	S55.00 Filing Certified Co (additional cop	ру	Certific Certific	Filing Fee, cate of Status & ed Copy nal copy is enclosed)
	ling Addres			eet Address:	ction	
Registration Section Division of Corporations				Registration Section Division of Corporations		
P.O). Box 632	7		e Centre of T		010
Tal	lahassee, I	L 32314	2415 N. Monroe Street, Suite 810			

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

Florida document number L19000152108 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: TCS HOLDINGS LLC The new name must be distinguishable and contain the words "Limited Liability 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) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new regagent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address Florida	RENT-A-RI	DE LLC	
Florida document number L19000152108 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: TCS HOLDINGS LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 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) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address Florida	(Name of the Limited Liability Compar (A Florida Limited L	y as it now appears on our records.) lability Company)	
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A. If amending name, enter the new name of the limited liability company here: CCS HOLDINGS LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." Conter new principal offices address, if applicable: Principal office address MUST BE A STREET ADDRESS) Conter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address Florida	lorida document number L19000152108		
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Name of New Registered Agent: New Registered Office Address: Enter Florida street address , Florida	Enter new mailing address, if applicable: <u>Mailing address MAY BE A POST OFFICE BOX</u>) 3. If amending the registered agent and/or registered office a	ddress on our records, enter the n	10 55
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New Registered Office Address: Enter Florida street address , Florida			
Enter Florida street address , Florida	Name of New Registered Agent:	<u> </u>	····································
Enter Florida street address , Florida	New Periotes of Office Address.		
	New Registered Office Address.	Enter Florida street address	
City Zip Code			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 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
CEO	TRAVIS WILLIAMS	17627 SW 31ST CT	
		MIRAMAR, FL 33029	□Remove
			= Change
			□Add
			□Remove
			□Add
			□Remove
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Effective date, if other than the date of an effective date is listed, the date must be Note: If the date inserted in this bloc document's effective date on the Department.	be specific and cannot be priock does not meet the applic	r to date of filing or more the cable statutory filing requ		
record specifies a delayed effective of is filed.	date, but not an effective t	ime, at 12:01 a.m. on the	e earlier of: (b) The 90th da	ay after the
JULY 16 Dated	2020			
Dated JULY 16 Travis Williams - CI	lians			