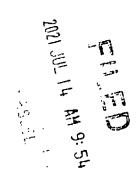
## 120000321138

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
()
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
(2-3-3-3-4)
Certified Copies Certificates of Status
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



400369896364



07/14/21--01008--021 \*\*25.00

Mind

2021 JUL 14 AM 9:54

JUL 1 4 2021 ! ALBRITTON

## **COVER LETTER**

TO: Reg Div	gistration Sect vision of Corpo	ion prations	
		UM AUTOS, LLC	•
SUBJECT:		Name of Limit	ed Liability Company
The enclose	d Articles of A	mendment and fee(s) are subm	nitted for filing.
Please return	n all correspon	dence concerning this matter to	o the following:
	Division of Corporations  RNL PREMIUM AUTOS, LLC		
			Name of Person
		SAJO FINANCIAL CORP	
			Firm/Company
3801 N UNIVERSITY DRI		3801 N UNIVERSITY DRI	IVE, 318
			Address
		SUNRISE, FL 33351	
			City/State and Zip Code
		SAJOFINANCIAL@BELL	SOUTH.NET
For further	information co	oncerning this matter, please ca	
DAVID S	CRAMMER		at (
	N'ame of	Person	Area Code Daytime Telephone Number
Enclosed is	s a check for th	ne following amount:	
		□ \$30.00 Filing Fee &	Certified Copy Certificate of Status &  (additional copy is enclosed) Certified Copy
R D P	Registration S Division of C P.O. Box 632	Section Corporations 27	Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroc Street, Suite 810

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

TO	)	
ARTICLES OF OR	AUTOS, LLC v as it now appears on our records.) ability Company)	
OF	The state of the s	pi <sup>rg</sup>
		44
RNL PREMIUM A	AUTOS LLC	
KNL PREMION A	v os it now annears on our records.)	N.
(Name of the Limited Liability Company (A Florida Limited Lia	ability Company)	
		} }
The Articles of Organization for this Limited Liability Company w	were filed on 10/09/2020 and assigned	
Florida document number L20000321138		
londa document number		
This amendment is submitted to amend the following:		
	Para a sum any harat	
A. If amending name, enter the new name of the limited liabili	nty company nere:	
The new name must be distinguishable and contain the words "Limited Liability	ty 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)		
<u>-                                    </u>		
B. If amending the registered agent and/or registered office a	ddress on our records, enter the name of the new register	<u>ed</u>
agent and/or the new registered affice address here:	······································	
agent and/or the new register or		
Name of New Registered Agent:		
New Besistered Office Address:		
New Registered Office Address:	Enter 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
MGR	LORDISON JEAN	11925 ROYAL PALM BLVD	□ Add
		APT 406	■Remove
		CORAL SPRINGS, FL 33065	□Change
			□Add
			□Remove
			Change
			□Add
			□Remove
			Change
			□Remove
			Change
			□Add
		Remove	
			Change
			□ Add
			□Remove

			_
			_
			_
			<del></del>
			_
			_
			_
·			_
			_
			_ <del>_</del>
			<del></del>
Effective date, if other than t (If an effective date is listed, the date r Note: If the date inserted in this document's effective date on the	lock does not meet the applicable s	(optional) of filing or more than 90 days after filing.) Pursuant to atutory filing requirements, this date will not be	605.0207 listed as
he record specifies a delayed effectord is filed.	ve date, but not an effective time, a	12:01 a.m. on the earlier of: (b) The 90th day a	after the
Dated	2021		
Ma an	Signature of a member or authorized	epresentative of a member	-

Filing Fee: \$25.00