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2021 JUN -3 PM 2: 10

6/29/21

COVER LETTER

TO: Registration Sec Division of Corp			•	•
SUBJECT:	MASTJAG Name of Lin	RENTALS L	<u>.LC</u>	
The enclosed Articles of a	Amendment and fee(s) are sub	bmitted for filing.		
Please return all correspon	ndence concerning this matter	to the following:		
	Mar	Vn R. Jordan Name of Person)	
		Firm/Company		
	803 SW	Helen Terr		2821 JU
	Lake Cit	City/State and Zip Code	25	J
	E-mail address:	to be used for future annual report not	mad. 10 m	2:
For further information co	ncerning this matter, please c	all:		0
Marka Jay	Person	at (386) 697 Area Code Daytin	-6137 ne Telephone Number	
Enclosed is a check for the	e following amount:			
□ \$25.00 Filing Fee	SS \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filin Certificate of Certified Co (additional co)	of Status &
Malling A 11				

Mailing Address:
Registration Section
Division of Corporations
P.O. Box 6327 Tallahassee, FL 32314

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Comp.	ENTALS Inv as it now appears on our rec Liability Company)	Sards.)
The Articles of Organization for this Limited Liability Company Florida document number <u>L2100010947</u>]	were filed on MAYCH	8, 2021 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	oility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation	LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		28
(Principal office address MUST BE A STREET ADDRESS)	N	A = = = = = = = = = = = = = = = = = = =
Enter new mailing address, if applicable:		ω ! 20 TO III
(Mailing address MAY BE A POST OFFICE BOX)	N	A THE CO
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>en</u>	ter the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Emer Florida street ad	Tress
	,	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 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
	,' ,'	\ <u> </u>	C Change
			□ □ Change
			Add
		//	□Remove
			□Change
		_/	□Add
			□Remove
			□Change
			□ Add
			□Remove

D. If amer	nding any other information, enter change(s) here: (Attach additional sheets, if necessary,)	
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(If an effec <u>Note:</u> 11	the date, if other than the date of filing: JUN 15, 2021 (optional) entire date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0 fithe date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed in the date on the Department of State's records.)207 (3)(I as the
the record	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after d.	the
Dated _	5/31/21 May 31. 2021.	
	- Mary Ryndan	
	5 31 21 May 31 . 2021. Signature of a member or authorized representative of a member Nava R. Jordan Lyngd or printed name of signature.	

Filing Fee: \$25.00