## L21000144084

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nar	me)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
		6/4/2/m

200364261692

04/19/21--01019--030 \*\*25.00

21 APR 19 AH II: 26

Office Use Only

## **COVER LETTER**

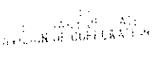
Registration Section

TO:

Division of Cor	porations		
Perez Renta	als LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Martin Perez		
		Name of Person	
	1 <del>10</del> 0	Firm/Company	
	21 s. 10th Ave		
		Address	· · · · · · · · · · · · · · · · · · ·
	Arcadia, Fl 34266		
		City/State and Zip Code	
	mperezrentals@gmail.com	to be used for future annual report not	ification)
For further information c	oncerning this matter, please c		
martin perez		941 2326083 at ()	
Name o	f Person	Area Code Daytin	ne Telephone Number
Enclosed is a check for the	ne following amount:		
■ \$25.00 Filing 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 Addres		Street Address:	
Registration S  Division of C		Registration Se Division of Co	
P.O. Box 632	27	The Centre of	Tallahassee
Tallahassee, I	FL 32314	2415 N. Monro	oe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



21 APR 19 AHII: 24

Perez Rentals LLC	
( <u>Name of the Limited Liability Compar</u> (A Florida Limited L	y <u>as it now appears on our records.</u> ) ability Company)
The Articles of Organization for this Limited Liability Company Florida document number <u>L21000149084</u>	were filed on 3/31/2021 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabi	lity company here:
The new name must be distinguishable and contain the words "Limited Liabili	ty Company," the designation "L.C." 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 a agent and/or the new registered office address here:	ddress on our records, <u>enter the name of the new registered</u>
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	Agreed a former and the managed

## 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.

Cire

Florida\_

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 = M $AMBR = A$	1anager Authorized Member	(vicion (4) din:	CTANGE (1) CTANG CRECTURE CNATURE		
Title	<u>Name</u>	21 APR 19 A	HII: 24 Address	Type of Action	
mgr	Martin Perez		21 s. 10th ave.	■Add	
	_		Arcadia,F1 34266	<b>□</b> n	
				Change	
ap	grysela perez		21 s 10th ave.		
			arcadia, Fl 34266	■Remove	
				🗀 Add	
			<del></del>	□Remove	
				□Add	
				□Remove	
			<del></del>	Change	
<del></del>				DAdd	
				□Remove	
				□Change	
				∐Add	
				□Remove	
				□ Change	

mending any other informa			64 ADD 1	9 AHII: 24
			21 AT N	<del> </del>
<del>.</del>		<u> </u>		·
		<del></del>		
	<del> </del>			<del></del>
		•		
-	<del></del>		· · · · · · · · · · · · · · · · · · ·	
		<del></del>		<del></del>
ective date, if other than the		to data of Alice	(option	
effective date is listed, the date mu e: If the date inserted in this bl				
ument's effective date on the D	partment of State's records			
cord specifies a delayed effective filed.	date, but not an effective t	ime, at 12:01 a.m. o	on the earlier of: (b)	The 90th day after the
s med.				
ed april 12	2021			
	· · · · · · · · · · · · · · · · · · ·	<u> </u>	,	
_		1.i	/	•
Marke	Signature of a member or auth	(1)	m Por	$\Delta$

Filing Fee: \$25.00