L21000157699

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

Office Use Only



600367427696

RECEIVED

JUN 1 4 2021

75/18/21 -01014--031 **26.30

7/13/21



COVER LETTER

TO:

Registration Section

| Division of C | Corporations | | |
|-------------------------|---|--|---|
| | RENTALS SERVICES LLC | | • |
| SUBJECT: | Name of Lim | ited Liability Company | ··· |
| | | | |
| The enclosed Articles | of Amendment and fee(s) are sub | mitted for filing. | |
| Please return all corre | spondence concerning this matter | to the following | |
| | PAOLA ANGARITA | | |
| | | Name of Person | |
| | LUNE RENTALS SERVI | CES LLC | |
| | | Firm/Company | |
| | 5139 MARBELLA ILSE I | OR | |
| | | Address | |
| | ORLANDO, FLORIDA 33 | 2837 | |
| | | City/State and Zip Code | |
| | LUNERENTALSORL@GI | | |
| | | to be used for future annual report not | incation) |
| For further informatio | n concerning this matter, please c | all: | |
| PAOLA ANGARITA | | 407 6978595 at () | |
| Nan | e of Person | Area Code Daytin | ne Telephone Number |
| Enclosed is a check fo | or the following amount: | | |
| ■ \$25.00 Filing Fee | S30 00 Filing Fee & Certificate of Status | ☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) | S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) |
| P.O. Box 6 | n Section f Corporations | Street Address: Registration Se Division of Co The Centre of 2415 N. Monro | rporations |

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| npany as it now appears on our records.) ed Liability Company) | |
|--|--|
| any were filed on (04/05/2021 | and assigned |
| | |
| | |
| iability company here: | |
| iability Company," the designation "LLC" or the abb | reviation "L.L.C." |
| | |
| | |
| | |
| | |
| | |
| | |
| ce address on our records, enter the name | of the new register |
| et address on our records, <u>enter the name</u> | or the new registers |
| | |
| | (# <u>\</u> |
| | · |
| | |
| Enter Florida street address | Zip Code: 5 |
| i | ice address on our records, enter the name |

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 |
|--------------|----------------|------------------------|-----------------|
| MGRM | HECTOR MARIN | 5139 MARBELLA ISLE DR. | Add |
| | | ORLANDO, FL 32837 | □Remove |
| | | | |
| MGRM | PAOLA ANGARITA | 5139 MARBELLA ISLE DR. | = Add |
| | | ORLANDO, FL 32837 | □Remove |
| | | | □Change |
| MGR | EVERT SUAREZ | 3014 BANSBURY CT | |
| | | KISSIMMEE, FL 34747 | ■ Remove |
| | | | □ Change |
| | | | □Add |
| | | | 🗀 Remove |
| | | | □Change |
| | | | □Add |
| | | | Remove |
| | | | □ Change |
| | | | □Add |
| | | <u> </u> | □Remove |
| | | | □Change |

| | | | | | - |
|---|---|---|----------------------|---|----------------------------------|
| | | | | | |
| | | | | | |
| | | | | | |
| | | - | | | |
| | | | | | |
| | | <u> </u> | | | |
| | | | ···· | | |
| | | | | | , |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | , | | |
| | | | | | |
| | | | | | |
| fective date, if other than the entering date is listed, the date must one: If the date inserted in this blocument's effective date on the De | be specific and cannot back does not meet the a | e prior to date of filing applicable statutory | gor more than 90 day | (optional) ys after filing) Pursu nts, this date will no | ant to 605,020 of be listed a |
| ecord specifies a delayed effective is filed. | date, but not an effec | tive time, at 12.01 | a.m on the earlier | of. (b) The 90th | |
| MAY 25 | 2021_ | | | | |
| ted MAY 25 | |) | | | 1921 July 114 |
| | \ | | | | _ |
| | Signature of a grember of | or authorized represen | uauv≱of a member | | |