

121000243662

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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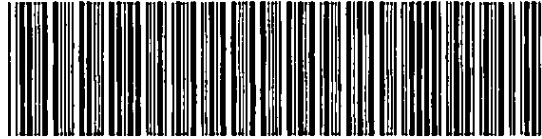
(Business Entity Name)

(Document Number)

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2022 MAR 14 AM 8:31

SECRETARY OF STATE  
TALLAHASSEE, FL

A. BUTLER

MAR 28 2022

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Koltech Rentals LLC  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Mark Morrissey  
Name of Person

\_\_\_\_\_  
Firm/Company

102 Brook Hill Dr. Apt 101 P  
Address

Panama City Beach, FL 32407  
City/State and Zip Code

morimar90@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Mark Morrissey at ( 262 ) 323-4005  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the 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 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

FILED

Valtech Aero LLC

2022 MAR 14 AM 8:31

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

SECRETARY OF STATE  
TALLAHASSEE, FL

The Articles of Organization for this Limited Liability Company were filed on 05/25/2021 and assigned  
Florida document number L21000243662.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Valtech Rentals 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)

102 Rock Hill Dr

Apt 101

Panama City Beach, FL 32407

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

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>	<u>Address</u>	<u>Type of Action</u>
AMBR	Corey D. Wilson	5118 Hickory st	<input type="checkbox"/> Add
	Corey Wilson, D	Panama City, FL 32404	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Scott G. Sliker	5118 Hickory st.	<input type="checkbox"/> Add
		Panama City, FL 32404	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Mark E. Morrissey	102 Rook Hill Dr. Apt 101	<input type="checkbox"/> Add
		Panama City Beach, FL 32407	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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Effective date, if other than the date of filing: \_\_\_\_\_ (Optional)  
(If an effective 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 605.0207 (3)(b)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If 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 the record is filed.

Dated 03/10/2022 .

*[Signature]*

Signature of a member or authorized representative of a member

Mark Morrissey

Typed or printed name of signee