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COVER LETTER

TO: Registration S Division of Co			
A	RO FL, LLC		
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles of	of Amendment and fee(s) are sub	omitted for filing.	
Please return all corresp	oondence concerning this matter	to the following:	
	JANI, TIRTH		
		Name of Person	
	RENT-PRO FL, LLC		
		Firm/Company	
	11339 LAKEVIEW DR		
		Address	
	CORAL SPRINGS, FL 33	071	
	JANITIRTH17110@GMA	City/State and Zip Code	
	•	to be used for future annual report noti-	fication)
For further information	concerning this matter, please c	all:	
ANGEL SANTOS		954 608-6360 at ()	
Name	of Person	Area Code Daytime	e 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 Addr		Street Address:	
Registration Division of	Section Corporations	Registration Sec Division of Cor	
P.O. Box 63		The Centre of T	•

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION **OF**

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RENT-PRO FL, LLC

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

The Articles of Organization for this Limited I		y were filed on $\frac{08/6}{2}$	03/2021	and assigned
Florida document number L210000349026	,			
This amendment is submitted to amend the fol	lowing:			
A. If amending name, enter the new name of	of the limited lia	bility company he	<u>re</u> :	
N/A				
The new name must be distinguishable and contain the	words "Limited Liab	oility Company," the de	signation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:	N/A		
(Principal office address MUST BE A STRE	ET ADDRESS)		·	
		N/A		
Enter new mailing address, if applicable:		170		
(Mailing address MAY BE A POST OFFICE	(BOX)			
			<u> </u>	
B. If amending the registered agent and/or	registered affice	address on our re	cords antar the n	ime of the new registers
agent and/or the new registered office addre		addition on our re	cords, <u>enter the na</u>	ine of the new registere
Name of New Registered Agent:	N/A			
New Registered Office Address:	N/A			
		Enter Flori	da street address	
			, Florida	7.ip Code
		City		Zip Code
New Registered Agent's Signature, if changing	Registered Agent	<u>:</u>		
I hereby accept the appointment as register provisions of all statutes relative to the prop accept the obligations of my position as reg being filed to merely reflect a change in the company has been notified in writing of this	per and complet istered agent as registered offic	e performance of a provided for in C	my duties, and I ar hapter 605, F.S. C	n familiar with and Or, if this document is

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

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<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	THAKKAR, GRISHMA	11339 ŁAKEVIEW DR.	□Add
		CORAL SPRINGS, FL 33071	
		1500 GATEWAY BLVD. SUITE 220	
MGR ACCORNERO, UMBERTO	BOYNTON BEACH, FL 33426	=	
		□Remove	
			□ Add
			□ Remove
			□Change
			□Adđ
			□Remove
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			Change

N/A	• • • • • • • • • • • • • • • • • • • •
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fective date, if other than the	date of filing: (optional)
in 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
	ock does not meet the applicable statutory filing requirements, this date will not be listed as
ocument's effective date on the De	partment of State's records.
ecord specifies a delayed effective	e date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
is filed.	and, our not an enterin extinct an enterin and on the barrier on (b). The your day after the
OCTOBER 5	2021
ated	
Jana	
	Signature of a member or authorized representative of a member
ANICEL CANTEGE DEC	TOTEDED A CENT
ANGEL SANTOS, REG	ISTERED AGENT

Filing Fee: \$25.00