## h22000022213

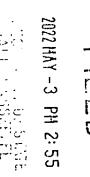
(Requestor's Name)	_
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(Business Entity Name)	_
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C. BRUMBLEY
JUN 2 4 2022

## **COVER LETTER**

TO: Registration Se Division of Cor			
	RNE RENTALS GROUP, LL	C	
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	indence concerning this matter	to the following:	
		RAUL F. FREIJO	
		Name of Person	
		Firm/Company	
	610 Sycamore Street, S		
		Address	<del></del>
· .	Celebration, Florida 347	47	
ŧ		City/State and Zip Code	
	etsamin2002@gmail.com		····
	E-mail address: (	to be used for future annual report notific	ation)
For further information o	oncerning this matter, please c	all:	
Gerrard L. Grant		321 800-6008 at ()	·
Name o	f Person	Area Code Daytime	Telephone Number
Inclosed is a check for the	ne following amount:		
■ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Section 500 Status & Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address		Street Address:	ion

Registration Section Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

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

MELBOURNE RENTALS GROUP, LLC		
(Name of the Limited Liabil (A Florid	ity Company as it now appears од our recor- la Limited Liability Company)	<u>ds.</u> )
The Articles of Organization for this Limited Liability ( Florida document number L22000022213	Company were filed on 01/06/2022	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the him	nited liability company here:	
WINTER HAVEN RENTALS LLC		
The new name must be distinguishable and contain the words "Lin	nited Liability Company," the designation "LLC	C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		<u> </u>
(Principal office address MUST BE A STREET ADD	RESS)	3 EI D
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registere agent and/or the new registered office address here:	ed office address on our records, <u>ente</u>	r the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street addre	222
	, F	lorida
-	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>	Name	Address	Type of Action
· ————			
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			☐ Change
			□ Add
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			□Remove
			Change

	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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ect	ive date, if other than the date of filing:(optional)
n eff te:	ive date, if other than the date of filing:(optional)  ective 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  If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed
cum	ent's effective date on the Department of State's records.
con is fil	d specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after led.
ted	4/26 , 2022
•	
	<del>\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ </del>
	Signature of a manufacture of a manufact
	Signature of a member of authorized representative of a member

. . . .

Filing Fee: \$25.00