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To:

Division of Corporations

Fax Number : (850)617-6383

Prom:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

Account Number : 110432003053 Phone : (561)694-8107 : (561)214-8442 Fax Number

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:_

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

BRITTONS RENTAL EXT LLC

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Britions Rental Ex	• • • • • • • • • • • • • • • • • • • •		
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears ability Company)	on our records.)	
The Articles of Organization for this Limited Liability Company	were filed on	02/18/2022	and assigned
lorida document number L22000072065			
nis amendment is submitted to amend the following:			
. If amending name, enter the new name of the limited liab	ility company he	<u>rė</u> :	
e new name must be distinguishable and contain the words 'Limited Liabil	lity Company," the de	signation "LLC" or the a	bbreviation "L.L.C."
nter new principal offices address, if applicable:	1565 NW 47th S	treet	
rincipal office address MUST BE A STREET ADDRESS)	Miami, FL 3314	2	
nter new mailing address, if applicable:	1565 NW 47th S	Street	
(Mailing address MAY BE A POST OFFICE BOX)	Miami, FL 3314	2	
. If amending the registered agent and/or registered office a sent and/or the new registered office address here:	address on our re	ecords, enter the nai	2022
Name of New Registered Agent:	_ 		A MA
New Registered Office Address:	Enter Flor	ida street address	-8 PJ
		, Florida	77.
	City		- Zip Code

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.

New Registered Agent's Signature, if changing Registered Agent:

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>	Address	Type of Action
MBR	Britton Hall	2993 Myrtle Oak Circle	
			≅Remove
		Davie, FL 33328	□ Change
MBR Clive Douglas	Clive Douglas	1565 NW 47th Street	≅Add
			\(\sigma\rmath{Remove}\)
		Miami, FL 33142	□ Change
			□Add
			□Remove
			☐ Change
			□Add
		□Remove	
			Change
		<u></u>	□Add
			□ Remove
		<u> </u>	☐ Change
			□Add
			□Remove
			Change

	(ontland)
Note	(optional) ffective date, if other than the date of filing: ffective 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 (If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as to ment's effective date on the Department of State's records.
the reco	ord 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 filed.
Date	March 7th , 2022
	Signature of a member or authorized representative of a member

Filing Fee: \$25.00