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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

Account Number : 110432003053 Phone : (561)694-8107

Fax Number : (561)214-8442

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

Email	Address;			

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN **BRITTONS RENTAL EXT LLC**

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BRITTONS RENTAL EXT LLC		
(Name of the Limited Liability Compa (A Florida Limited L	ny as it now appears on our records.) Jiability Company)	
The Articles of Organization for this Limited Liability Company Florida document number L22000072065	were filed on 02/21/2022	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC" or t	he abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)	<u></u>	
B. If amending the registered agent and/or registered office agent and/or the new registered office address here: Name of New Registered Agent:	address on our records, enter the	name of the new registere
New Registered Office Address:		
	Enter Florida street address Florid	20 P
 -	Ciny	Zip Code
New Registered Agent's Signature, if changing Registered Agent:	<u> </u>	58. L
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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
Member	Steven Dames	1410 nw 176th terr	■Add
		Miami FL 33169	Remove
			□Change
Member	Karina Duran	601 S mess hills	⊟Add
		El Paso Texas 79912	□ Remove
			Change
			□Add
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			□Add
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			DAdd
			Remove
			☐ Change
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			□Remove

). Ef namen	ding any other informatio	m, enter change(s) he	re: (Attoch addition	nd shows, if neverse	ŋIJ
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If the recent	ो शुक्तवंशित्य क वेलोम्भूषणे शक्तिरपोष्ट र एवं.	dete, but not an effective	(time, at 12,0F sum, s	so the carller of: (b)	The 90th day at

Typed or printed name of eigner

Jamil King