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SECRETARY OF STATE
TALLAHASSEE FATE

## **COVER LETTER**

TO:

Registration Section
Division of Corporations

Tallahassee, FL 32314

Y&D SOUTH FLORIDA RENTAL LLC SUBJECT: 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: YELAINE DIAZ-LUGO Name of Person Y&D SOUTH FLORIDA RENTAL LLC Firm/Company 10235 SW 130TH CT Address MIAMI, FL 33186 City/State and Zip Code YELAINE.DIAZ@YAHOO.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: YELAINE DIAZ-LUGO Name of Person Enclosed is a check for the following amount: ☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee, □ \$25.00 Filing Fee **☎** \$30.00 Filing Fee & Certificate of Status Certificate of Status & Certified Copy Certified Copy (additional copy is enclosed) (additional copy is enclosed) Mailing Address: Street Address: Registration Section Registration Section **Division of Corporations Division of Corporations** The Centre of Tallahassee P.O. Box 6327

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Y&D SOUTH FLORIDA RENTAL LLC			
(Name of the Limited Liability Comp. (A Florida Limited	any as it now appears on our records.) Liability Company)		
The Articles of Organization for this Limited Liability Company Florida document number 1.22000355328	and assigned		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	oility company here:		
The new name must be distinguishable and contain the words "Limited Liab	ility Company," the designation "LLC" or the	e abbreviation "L.L.C."	
Enter new principal offices address, if applicable:			
Principal office address MUST BE A STREET ADDRESS)		SECR	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		SEP -6 PM 4: 49 RETARY OF STATE LLAHASSEE, FL	
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>enter the n</u>	ame of the new registe	
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 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
MGR	DANILO R LUGO	10235 SW 130TH CT	
		MIAMI , FL 33186	■Remove
			□Change
AMBR	YELAINE DIAZ-LUGO	10235 SW 130TH CT	<b>≡</b> Add
		MIAMI, FL 33186	□Remove
		-	Change
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