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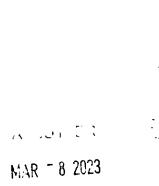
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## **COVER LETTER**

	gistration S vision of Co				
SUBJECT:		ARTY RENTAL FLORID	A. LLC		
Name of Limited Liability Company					
Dear Sir or	Madam:				
The enclose	ed Statemen	of Correction and fee(s) a	re submitted for filin	g.	
Please return	n all corresp	oondence concerning this n	natter to the followin	g:	
MANUEL I	DINER				
		Name of Person		_	
MANUEL I	DINER, P.A	۸.			
		Firm/Company		_	
2800 WEST	TON ROAD	, SUITE 204			
		Address		_	
WESTON,	FL. 33331				
	(	City/State and Zip Code		_	
mdiner@dir	nerlaw.com				
E-mail	l address: (t	o be used for future annual	report notification)	_	
For further i	information	concerning this matter, ple	ase call:		
MANUEL I	DINER		305	825-8151	
	Name	of Person	at ( Area Code	Daytime Telephone Number	
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314				Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	
Enclosed is	a check for	the following amount:			
□\$25 Filing	g Fee	☐ \$30 Filing Fee & Certificate of Status	■\$55 Filing Fee & Certified Copy	☐ S60 Filing Fcc, Certificate of Status & Certified Copy	

## STATEMENT OF CORRECTION FOR FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

Pursuan	it to section 605.0209, F.S., this document is being submitted to correct a previously filed document is being submitted to correct a previously filed document is PHESPARTY RENTAL FLORIDA. TECOLOGY.  The name of the limited liability company is:	ent. AM 6: 50
IIISI	The name of the finited hability company is.	
SECON THIRD	ARTICLES OF ORGANIZATION	
	(CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STA	<u>rement</u>
Ø	Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, statement are as follows:	and the corrected
	Name of one of the Managers was misspelled as Yenny P Bsallern Cortes	
	Correct spelling of said Manager is Yenny P. Ballen Cortes	
Ø	OR  Was defectively signed. The manner in which the document was defectively signed and the appas follows:	propriate correction are
	<u>OR</u>	
	The electronic transmission of the record was defective.	9/22
	re of new registered agent, if applicable :( NOTE: if correcting the registered agent, the new reging the designation).	stered agent must sign
I hereby provision obligati	egistered Agent's Signature, if changing Registered Agent:  accept the appointment as registered agent and agree to act in this capacity. I further agree to ons of all statutes relative to the proper and complete performance of my duties, and I am familia ons of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document a change in the registered office address, I hereby confirm that the limited liability company has change.	r with and accept the is being filed to merely
	Registered Agent's Signature	

Filing Fee: Certified Copy: \$25.00

\$30.00 (optional)