133000086413

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05/19/23--01012--010 **25.00

COVER LETTER

TO:

Registration Section

Division of Corp	orations			
SUBJECT: <u>THE ROY</u>	AL PKP RENTALS, LI			
	Name of Lim	ited Liability Company		
The enclosed Articles of A	mendment and fee(s) are sub	mitted for filing.		
Please return all correspon	dence concerning this matter	to the following:		
	Corpor	ate Maintenance Le	ad	
		Name of Person		
	Proc	essing Department		
		Firm Company		
	1	450 Vassar St		. <u>123</u>
		Address	-	
		Reno, NV 89502		
		City/State and Zip Code		
		pkprental@gmail.com to be used for future annual report notif	fication)	
For further information co	ncerning this matter, please ca			
Processi	ng Department	at (800) 638-2320		
Name of		Area Code Daytime	e Telephone Number	
Enclosed is a check for the	following amount:			
☑ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified C	of Status &
MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		STREET/COURI Registration Section Division of Corpor Clifton Building 2661 Executive Ce Tallahassee, Ft. 32	on rations enter Circle	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

THE ROYAL PKF		
(<u>Name of the Limited Liability Compa</u> (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 <u>L23000086473</u> .	were filed on 02/16/23	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liah	oility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	ility Company," the designation "LLC" or t	he abbreviation "L.L.C."
Enter new principal offices address, if applicable:	107 South Saint Cloud	
(Principal office address MUST BE A STREET ADDRESS)	Valrico FL. 33594	
Enter new mailing address, if applicable:	107 South Saint Cloud	5
(Mailing address MAY BE A POST OFFICE BOX)	Valrico	<u> </u>
	FL, 33594	
B. If amending the registered agent and/or registered or registered agent and/or the new registered office address her Name of New Registered Agent:		nter the name of the
New Registered Office Address:		
	Enter Florida street address	
 	, Florid	:i
	•	Zip Code
New Registered Agent's Signature, if changing Registered Agent:	Ē	
New Registered Office Address. Sew Registered Agent's Signature, if changing Registered Agent: hereby accept the appointment as registered agent and agr rovisions of all statutes relative to the proper and complete	City Ever to act in this capacity. I furthe	Zip Code r agree to comply

If Changing Registered Agent, Signature of New Registered Agent

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	Francisco Rivera	107_South Saint Cloud	
		Valrico	_ □ Remove
		FL, 33594	
			Remove
			☐ Change
			<u>.</u> ⊟ Add
			Remove
			□ Change
			<u> </u>
			□ Remove
			☐ Change
			□ Add
			Remove
			Change
			Remove
			Change

Effective date, if other than the date of filing: N/A [an effective date is listed, the date must be specific and carnot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.020 [and the content of the state of the filing or more than 90 days after filing.) Pursuant to 605.020 [and the content of the filing or more than 90 days after filing.) Pursuant to 605.020 [and the content of the filing or more than 90 days after filing.) Pursuant to 605.020 [and the content of the filing or more than 90 days after filing.) Pursuant to 605.020 [and the content of the filing or more than 90 days after filing.) Pursuant to 605.020 [and the content of the filing or more than 90 days after filing.) Pursuant to 605.020 [and the content of the filing or more than 90 days after filing.) Pursuant to 605.020 [and the content of the filing or more than 90 days after filing.) Pursuant to 605.020 [and the content of the filing or more than 90 days after filing.) Pursuant to 605.020 [and the content of the filing or more than 90 days after filing.) Pursuant to 605.020 [and the content of the filing or more than 90 days after filing.) Pursuant to 605.020 [and the content of the filing or more than 90 days after filing.) Pursuant to 605.020 [and the content of the filing or more than 90 days after filing.) Pursuant to 605.020 [and the content of the filing or more than 90 days after filing.) Pursuant to 605.020 [and the content of the filing or more than 90 days after filing.) Pursuant to 605.020 [and the content of the filing or more than 90 days after filing.) Pursuant to 605.020 [and the content of the filing or more than 90 days after filing.) Pursuant to 605.020 [and the content of the filing or more than 90 days after filing.) Pursuant to 605.020 [and the content of the filing or more than 90 days after filing.) Pursuant to 605.020 [and the content of the filing.] Pursuant to 605.020 [and the content of the filing.] Pursuant to 605.020 [and the content of the filing.] Pursuant to 60	ective date, if other than the date of filing: N/A (optional) effective 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 ter if the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed rument's effective date on the Department of State's records. record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlies the 90th day after the record is filed.							
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	/	——————————————————————————————————————			ZCC representative	of a member		

Page 3 of 3

Filing Fee: \$25.00

COVER LETTER

TO:

TO:	Registration Se Division of Cor			
SUBJE	ECT: <u>THE RO</u>	YAL PKP RENTALS, LI	_C ited Liability Company	
			The system of th	
The en	closed Articles of	Amendment and feets) are sub	mitted for filing.	
Please	return all correspo	ndence concerning this matter	to the following:	
		Corpor	ate Maintenance Lea	ad
			Name of Person	
		Proc	essing Department	
			Firm Company	7677
		1	1450 Vassar St	
			Address	. 6
			Reno, NV 89502	
			City State and Zip Code	
			pkprental@gmail.com to be used for future annual report notif	ication)
For fur	ther information c	oncerning this matter, please ca	·	
Processing Department		at (800) 638-2320		
	Name o	f Person	Area Code Daytime	Telephone Number
Enclos	ed is a check for th	ne following amount:		
Ø \$2:	5.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy)'s enclosed)	☐ \$60.00 Fiting Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32344		STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle		

Tallahassee, FL 32301