Office Use Only



100404964151

A STATE OF THE STA

5/13/23 V:LN

2023 MAR 22 AM 10: 03

TILED

COVER LETTER

Divisio	on of Corp	orations		
SUBJECT: B	AND R RI	ENTALS LLC		
		Name of Lim	ited Liability Company	1-131
The enclosed A	rticles of A	mendment and fee(s) are sub	mitted for filing.	
Please return all	l correspond	dence concerning this matter	to the following:	
		Alexander Bentaneor		
			Name of Person	
			Firm/Company	
		239 W Avenida Del Rio		
			Address	
		Clewiston FL, 33440		
		······································	City/State and Zip Code	
		alex110792@hotmail.com		
		E-mail address: (t	o be used for future annual report notificati	on)
For further infor	rmation con	cerning this matter, please ca	ill:	
Alexander Bent	апсог		863 228-7154 at()	
Name of Person		Person		ephone Number
Enclosed is a ch	eck for the	following amount:		
□ \$25.00 Filir	ng Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	■ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

. .

Registration Section

TO:

Street Address: Registration Section Division of Corporations

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

B And R Rentals C.C.						
(Name of the Limited L. (A F	ability Company as it now appears on our re forida Limited Liability Company)	<u>cords.</u>)				
The Articles of Organization for this Limited Liabil	ity Company were filed on 2/20/2023	and assigned				
Florida document number 1.2300091857	·					
This amendment is submitted to amend the following	ıg:					
A. If amending name, enter the new name of the	limited liability company here:					
Bentancor Properties LLC		200				
The new name must be distinguishable and contain the words	"Limited Liability Company," the designation					
Enter new principal offices address, if applicable	:	# -				
(Principal office address MUST BE A STREET A.		N N				
		AH IO:				
		ST				
Enter new mailing address, if applicable:		7 03				
(Mailing address MAY BE A POST OFFICE BOX	· · · · · · · · · · · · · · · · · · ·					
B. If amending the registered agent and/or regis agent and/or the new registered office address he		nter the name of the new registered				
						
Name of New Registered Agent:						
New Registered Office Address:	Enter Florida sireet a	Enter Florida street address				
		Florida				
_	Сиу	, Florida Zip Code				
New Registered Agent's Signature, if changing Regis	stered Agent:					
I hereby accept the appointment as registered as provisions of all statutes relative to the proper a accept the obligations of my position as registere being filed to merely reflect a change in the registeronapy has been notified in writing of this char	nd complete performance of my dutie ed agent as provided for in Chapter 6 stered office address. Thereby confirt	s, and I am familiar with and 505, F.S. Or, if this document is				

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

Title	<u>Name</u>	Address	Type of Action
VP	Julio Rodriguez	307 E Sugarland Hwy	
		Clewiston FL, 33440	_
			□Change
	 .		□Add
	·		□ Петюче
			□Add
			□Remove
			□Change
		10-10-01	□Add
	·		□Remove
			□ Change
			D∧dd
			□Remove
			DRemove

								·····
							<u></u>	***
								**
				<u>.</u>				
						·	1	
					· <u>-</u>			
								
		·						
		<u>.</u>						
							·	
								
								
		·				- · · 		
								
								
ffactiva da	e, if other than the d	ate of filing	. .			(amtic	mal)	
an elfective d	ite is listed, the date must b	e specific and c	cannot be prio	ir to date of fi	ling or more tha	option 90 days after	filing.) Pursuant	Lto 605.020
ote: 11 the o ocument's e	ate inserted in this bloc fective date on the Dep	k does not me artment of St	cet the applicate's records	cable statul s.	ir <u>v</u> ming redu	irements, this	date will not	be listed a
	ies a delayed effective (late, hut not a	ın effective t	time, at 12:0) La.m. on the	earlier of: (h)	The 90th di	iy after the
is filed.								
1								
ned		···	-	·				
	Alle	For	X_					
	Alexand	gnalure of a me	ember or auth	iorized repre:	sentative of a m	ember		

Filing Fee: \$25.00