5/30/23 9:52 AM

Division of Corporations

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From:

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# LLC AMND/RESTATE/CORRECT OR M/MG RESIGN ORLANDO FIRST IMPRESSION RENTALS LLC

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### **COVER LETTER**

TO:	Registration Se Division of Cor		•	6		
cup ic.		ORLANDO FIRST IMPRESSION RENTALS LLC				
SUBJE	CI;	Name of Lim	ited Liability Company			
		Amendment and fee(s) are sub	•			
		Cheyenne Moseley				
		<u> </u>	Name of Person			
		Legalzoom.com, Inc.				
			Firm/Company	<del></del>		
		101 N Brand Blvd 11th Fl				
			Address			
		Glendale, CA 91203				
			City/State and Zip Code			
		orlandosolracllc@gmail.com				
			to be used for future annual report notifi	ication)		
For furt	her information c	oncerning this matter, please ca	all:			
Cheyen	ne Moseley		800 773-0888 at ( )			
	Name o	l Person		Telephone Number		
Enclose	d is a check for th	ne following amount:				
☐ <b>\$</b> 25	.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	■ \$55.00 Filing Fcc & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
	MAIL	ING ADDRESS:	STREET/COURIE	ER ADDRESS:		

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

To:

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ORLANDO FIRST IMPRESSION RENTALS LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on 05/01/2023 \_\_ and assigned Florida document number L23000212588 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: ORLANDO SOLRACILIC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the 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) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

### 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.

City

If Changing Registered Agent, Signature of New Registered Agent

, Florida

دی

Zip Code

To		Page: 5 of 6
	•	, 440.00.0

2023-05-30 07:56:24 PDT

LegalZoom.com, Inc.

From: Sarah Acevedo

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 = M $AMBR = A$	MGR = Manager AMBR = Authorized Member				
<u>Title</u>	Name	Address	Type of Action		
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		<del></del>	Change		
			□ Remove		
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	Page: 6 of 6	2023-05-30 07:56:24 PDT	LegalZoom.com, Inc.	From: Sarah Acev
D. If amei	iding any other informa	ation, enter change(s) here: (Attach a	additional sheets, if necessary.)	
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(If an effe <u>Note:</u> I	ctive date is listed, the date mu f the date inserted in this b	e date of filing:  st be specific and cannot be prior to date of filin lock does not meet the applicable statutory department of State's records.		
	ord specifies a delaye 90th day after the rec	d effective date, but not an effect cord is filed.	tive time, at 12:01 a.m. on the	e earlier of:
Dated _	May 23rd	2023		
	Conton 20	rA 1		
	- Comment	Signature of a member or authorized represer	ntative of a member	<del>_</del>
	CARLOS QUINCHE			
		Typed or printed name of sig		<u></u>

To.

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