Note: Please print this page and use it as a cover sheet. Type the fax sudit number (shown below) on the top and bottom of all pages of the document.

(((H23000257483 3)))

H230002574833ABC1

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : SANCHEZ VADILLO LLP

Account Number :

: 12015000001B

Phone

(305)485-9709

Fax Number

; (813)492-8840

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Ensil Address: Conforation DUVIGNUS.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN KRT RENTALS LLC

Complete	
Ceruficate of Starus	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

Estimated Charge \$25.00

Blectronic Filing Menu

Corporate Filing Menu

Help

ି . . . ଧ

T. LEMIEUX JUL 25 2023

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

KRT RENTALS LLC		
(Name of the Limited	Liability Company as it now appears on our records.) Florida Limited Liability Company)	
The Articles of Organization for this Limited Link	pility Company were filed on06/06/2023	and assigned
Florida document number L23000272965	·	
This amendment is submitted to amend the follow	ring;	
A. If amending name, enter the new name of the	he limited liability company here:	
The new name must be distinguishable and contain the work	is "Limited Liability Company," the designation "LLC" or the abbi	eviation "L.L.C."
Enter new principal offices address, if applicab	le:	
(Principal office address MUST BE A STREET)	ADDRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BO	<u></u>	
B. If amending the registered agent and/or registered agent and/or the new registered office address h	stered office address on our records, <u>enter the name</u> . pre:	of the new registere
Manage (St. 19 alto 14 alto	₩.	20
Name of New Registered Agent:		823°
New Registered Office Address:	Enter Florida street address	. –
		# F
_	City , Florida	Zip Code [®]
New Registered Agent's Signature, if changing Regi	stered 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

Title	Name	Address	Type of Action
MGR	CARRETE JIMENEZ, CARLOS R	9323 CEDAR LANE	
		BETHESDA, MD 20814	■ Remove
			Change
			□Remove
			Change
			□Remove
			□ Change
			□ A dd
			□ Remove
			Change
<u></u>	<u> </u>		□Add
			Remove
			Change
			□Add
			□Change

			_	
				
	_			
				
				
				
				
		<u> </u>		
			-	
				
				
	 			
		· · · · · · · · · · · · · · · · · · ·		
Effective date, if other than the If an effective date is listed, the date mus Note: If the date inserted in this ble document's effective date on the De			(optional) then 90 days after filing.) Pu equirements, this date wil	rruant to 605.0207 I not be listed as
e record specifies a delayed effective rd is filed.	s date, but not an effective	time, at 12:01 a.m. on	the earlier of: (b) The 90	Oth day after the
	2023			
Dated	 ,	 ·		
Dated	Signature of a member or aut	· ·		

Filing Fee: \$25.00