8/4/23, 9:17 AM Division of Corporations

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

> > (((H23000271303 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LEGALZOOM.COM INC.

Account Number : I20010000062 Phone : (323)962-8600 Fax Number : (323)389-0502

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

Email Address:\_\_\_

# LLC AMND/RESTATE/CORRECT OR M/MG RESIGN T & II RENTAL PROPERTIES 2 LLC

Certificate of Status	0
Certified Copy	1
Page Count	06
Estimated Charge	\$55.00

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Help

T. LEMIEUX

TO:

Registration Section

### **COVER LETTER**

Div	ision of Co	rporations		
SUBJECT:	T & H RENTAL PROPERTIES 2 LLC			
oomier.		Name of Lin	nited Liability Company	
The enclosed	d Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return	all correspo	ondence concerning this matter	to the following:	
		Cheyenne Moseley		
			Name of Person	
		Legalzoom.com, Inc.		
			Firm/Company	
		101 N Brand Blvd I tih Fl		
			Address	<del></del>
		Glendale, CA 91203		
			City/State and Zip Code	
		henrik.margard@gmail.com		
		E-mail address: (	to be used for future annual report notifi	cation)
For further in	iformation c	oncerning this matter, please c	all:	
Cheyenne M	loseley		800 773-0888 at ( )	
	Name o	f Person		Telephone Number
Enclosed is a	check for th	ne following amount:		
□ \$25.00 F	iling 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 STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Lim	ited Liability Company as (A Florida Limited Liabil	It now appears on our records.) ity Company)	<del></del>
The Articles of Organization for this Limited Florida document number L23000343403	Liability Company wer	e filed on 07/20/2023	and assigned
This amendment is submitted to amend the fo	llowing:		
A. If amending name, enter the new name	of the limited liability	company here:	
The new name must be distinguishable and contain the	words "Limited Liability C	ompany," the designation "LLC" or th	e abbreviation "L.L.C."
Enter new principal offices address, if appli	icable:		
(Principal office address MUST BE A STRE	ET ADDRESS)		
Enter new mailing address, if applicable:	_		
(Mailing address MAY BE A POST OFFICE	<u> </u>	<del>-</del> ·	<del> </del>
	_		
B. If amending the registered agent and	-	address on our records, ent	
registered agent and/or the new registered (	office address here:		ت جون
Name of New Registered Agent:	Henrik Margard		) 
New Registered Office Address:	851 SW 17th Ter.		
		Enter Florida street address	·>
	Cape Coral	, Florida	· ·
		, . 101101	

#### 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.

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

To:

<u>Title</u>	Name	Address	Type of Action
AMBR	Henrik Margard		
<del></del>			
			Remove
		851 SW 17th Ter.	Kelilove
		Cape Coral, FL 33991	∃ Change
			□ Remove
			Change
			□ Add
			□ Remove
			☐ Change
			□ Add
			☐ Remove
			☐ Change
			☐ Remove
			☐ Change
			Remove
			☐ Change

•	, Page: 25 of 30	2023-08-04 15:58:37 POT	13236068205	From: Rajiv Sr
D. If a	mending any other informa	tion, enter change(s) re: (Attach ad	lditional sheets, if necessary.)	
	<u> </u>			
		1		
				<del></del>
				<del></del>
				<del></del>
				<del></del>
				<del></del>
				<del></del>
		<del> </del>		
				<del>_</del>
<u>No</u>	ective date, if other than the a effective date is listed, the date muster. If the date inserted in this blooment's effective date on the December 2.	date of filing:  the specific and cannot be prior to date of filing sek does not meet the applicable statutory epartment of State's records.	(optional) or more than 90 days after filing.) Pursua filing requirements, this date will no	nt to 605.0207 (3)(b) t be listed as the
	record specifies a delayed he 90th day after the reco	effective date, but not an effective ord is filed.	ve time, at 12:01 a.m. on the	e earlier of:
Dat	od July 26	<del></del>	,	
		Signature of a meraber or authorized represent	ative of a member	
	Henrik Margard			
		Typed or printed name of signs	:ee	<del></del>

To:

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Filing Fee: \$25.00