L23000516482

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COVER LETTER

TO:

Registration Section

Division of Cor	rporations		
	RENTAL LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	VICTOR M PARRA		
	·	Name of Person	
	GBI ACCOUNTING LLC	•	
	- 	Firm/Company	
	5201 BLUE LAGOON DI	₹	
		Address	·
	SUITE 800		
		City/State and Zip Code	
	MIAMI, FL 33126		
		to be used for future annual report notif	tication)
For further information c	concerning this matter, please c	all:	
VICTOR M PARRA		786 2018304	
Name o	of Person	at () Area Code Daytime	e Telephone Number
Enclosed is a check for t	he following amount:		
■ \$25.00 Filing 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 Addre		Street Address:	Nion
Registration Division of C		Registration Sec Division of Cor	
P.O. Box 633	27	The Centre of T	allahassee
Tallahassee,	FL 32314	2415 N. Monroo Tallahassee, FL	e Street, Suite 810 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

THE LION RENTAL LLC			
(Name of the Lim	ited Liability Compa (A Florida Limited	iny as it now appears on our records Liability Company)	<u>s.</u>)
he Articles of Organization for this Limited I lorida document number <u>L23000516482</u>		were filed on 01/01/2024	and assigned
his amendment is submitted to amend the fol			
If amending name, enter the new name	of the limited liab	ility company here:	
he new name must be distinguishable and contain the	words "Limited Liabi	lity 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)		7950 NW 53 ST	
		SUITE 342	
		DORAL FL. 33166	
Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BOX)		7950 NW 53 ST	
		SUITE 342	
		DORAL FL, 33166	
 If amending the registered agent and/or gent and/or the new registered office addre 		address on our records, <u>enter (</u>	the name of the new regis
Name of New Registered Agent:	GBI ACCOUNTING LLC		
New Registered Office Address:	5201 BLUE LA	AGOON DR	•
-		Enter Florida street address	
	MIAMI	Flo	orida 33126
	<u>-</u>	City	Zip Code

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.

GBI ACCOUNTING

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

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	VISION GLOBAL HOLDING GR	7950 NW 53 ST DORAL FL 33166	∃ Add
			□Remove
			□ Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			Change
	-		□Add
			□Remove
			□Change
			□Add
			□Remove □
			□Change
			□Add
			□Remove
			□Change

	Signature of a member of	r authorized represen	itative of a member	 	
ned		· ·	DQ.		
04/25 ited			- 0		
ecord specifies a delayed effectis filed.	tive date, but not an effec	tive time, at 12:01	a.m. on the earlier of:	(b) The 90th day aft	er the
in effective date is listed, the date on the cument's effective date on the	block does not meet the Department of State's re	applicable statutory cords.	filing requirements, the	nis date will not be lis	sted as
fective date, if other than	he date of filing:		(opi	tional)	- I
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Filing Fee: \$25.00