

| (Requestor's Name) |
|---|
| (Address) |
| (Address) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
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03/05/24--01007--004 #60.00

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March 18, 2024

TILTON C.JACKSON 1008 EAST 13TH COURT PANAMA CITY,FL 32401

SUBJECT: SIMPLY RENTALS LLC

Ref. Number: L24000020408

We have received your document for SIMPLY RENTALS LLC and your check(s) totaling \$60.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Kiora Hester Regulatory Specialist II

Letter Number: 124A00005826

Rec 6/3

COVER LETTER

| Division of Corp | | | | ď | |
|---------------------------------------|--|---|-----------------|----------------|---|
| SUBJECT: Simply Ren | ntals LLC | | | | |
| | | ted 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: | | | |
| | Tilton C.Jackson | | | | |
| | | Name of Person | | | |
| | Simply Rentals | | | | |
| • | | Firm/Company | | | |
| | 1008 East 13th Court | | | | |
| | | Address | | 2024 | |
| | Panama City | | | 2024 JUN -3 | |
| | | City/State and Zip Code | | -i j. ω | 3 |
| | simplyrentalsllcnwf@gmail | .com to be used for future annual report notifica | tion) | . P | 1 |
| For further information c | concerning this matter, please c | · | | PH 3: 06 | |
| Samuel Jackson | | at (850) 628-7650 | | | |
| Name o | of Person | | elephone Number | | |
| Enclosed is a check for the | he following amount: | | | | |
| □ \$25.00 Filing Fee | ☐ \$30.00 Filing Fee & Certificate of Status | □ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) | Certified | te of Status & | |
| <u>Mailing Addres</u> Registration | | Street Address: Registration Secti | on | | |

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

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

| Simply Rentals LLC | | |
|--|--|--------------------------------|
| (<u>Name of the Limited Liability Compa</u> (A Florida Limited I | ny as it now appears on our record Liability Company) | <u>ls.</u>) |
| The Articles of Organization for this Limited Liability Company | were filed on 01/09/2024 | and assigned |
| Florida document number L24000020408 | | |
| his amendment is submitted to amend the following: | | |
| A. If amending name, enter the new name of the limited liab | ility company here: | |
| The 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: | 1008 East 13th Court | 202 |
| Principal office address MUST BE A STREET ADDRESS) | Panama City FL 32401 | 5 70 |
| | | 22 4704701 |
| | | \sim \sim \sim |
| Enter new mailing address, if applicable: | 1008 East 13th Court | |
| Mailing address MAY BE A POST OFFICE BOX) | Panama City FL 32401 | . E. O |
| | | |
| B. If amending the registered agent and/or registered office a gent and/or the new registered office address here: Name of New Registered Agent: | address on our records, <u>enter</u> | the name of the new regi |
| | | |
| New Registered Office Address: | Enter Florida street addres | 55 |
| | . मा | orida |
| | 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.

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 |
|-------------------------|--|----------------------|-------------------|
| MGR | Kadesha Williams | 1108 East 13th Court | □Add |
| | Panama City FL 32401 | ■Remove | |
| | | | □ Change |
| MGR Brittney M. Jackson | 1008 East 13th Court | □Add | |
| | | Panama City FL 32401 | ■Remove |
| | | | □Change |
| AMBR | R Kadesha Williams Pa R Brittney M. Jackson Pa BR Christine L. Jackson 10 | 1008 East 13th Court | Add T |
| | | Panama City FL 32401 | ω Ω Ω Remove |
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| If amending any other information, enter change(s) here: (Attach additional | sheets, if necessary.) | |
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| Effective date, if other than the date of filing: 01/09/2024 (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than the date inserted in this block does not meet the applicable statutory filing red document's effective date on the Department of State's records. | | |
| e record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the | ne earlier of: (b) The 90th day : | after the |
| Dated 2/24/2024 | | |
| Signature of a mounder or authorized representative of a | inember | - |
| TI TI | | |
| Typed or printed name of signee | ···· | _ |

E. E. 635.00