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(Requestor's Name)

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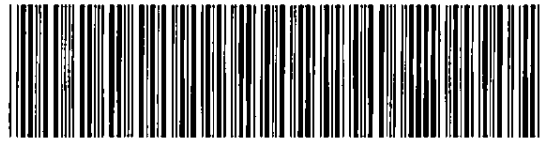
(Business Entity Name)

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FILED
24 MAY -7 PM 2:44
TALLAHASSEE, FLORIDA

Law Offices
of
STEVEN D. BRAVERMAN, P.A.

STEVEN D. BRAVERMAN, ESQ.

8551 West Sunrise Blvd.
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Plantation, FL 33322

TEL: (954) 474-5988
FAX: (954) 474-2844
EMAIL: steven@bravermanpa.com

May 2, 2024

Florida Department Of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

**RE: AMENDMENT TO ARTICLES OF ORGANIZATION FOR REGINA JMS
RENTALS, LLC**

Dear Sirs:

Enclosed please find a fully completed and executed Articles of Amendment to Articles of Organization of Regina JMS Rentals, LLC along with our check in the amount of \$60.00 and a self-addressed stamped envelope.

Please file the Articles of Amendment and return proof to us.

Sincerely,

A handwritten signature in black ink, appearing to read 'Steven D. Braverman', followed by a long horizontal line.

STEVEN D. BRAVERMAN, P.A.

SDB:ecj
Enclosures

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

REGINA JMS 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 January 16, 2024 and assigned Florida document number L2400030259.

This amendment is submitted to amend the following:

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 Company," the designation "LLC" or the abbreviation "LLC."

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)

FILED
MAY - 7 PM 2024
CLERK OF THE COURT
STATE OF FLORIDA

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

, Florida

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>	<u>Address</u>	<u>Type of Action</u>
<u>P&T</u>	<u>REGINA SLEEM</u>	<u>240 Jacaranda Drive</u>	<input checked="" type="checkbox"/> Add
		<u>Plantation, FL 33324</u>	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
<u>P&T</u>	<u>REGINA LINDO</u>	<u>240 Jacaranda Drive</u>	<input type="checkbox"/> Add
		<u>Plantation, FL 33324</u>	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
<u>MGR</u>	<u>STEPHEN V. SLEEM</u>	<u>10545 AVILA CIRCLE</u>	<input checked="" type="checkbox"/> Add
		<u>Fort Myers, FL 33913</u>	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
<u>MGR</u>	<u>STEPHEN D. SLEEM</u>	<u>10545 AVILA CIRCLE</u>	<input type="checkbox"/> Add
		<u>Fort Myers, FL 33913</u>	<input checked="" type="checkbox"/> Remove
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(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

April 27th, 2024

Signature of a member or authorized representative of a member

X STEPHEN V SLEEM
Typed or printed name of signee

Filing Fee: \$25.00