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COVER LETTER

TO: Registration Se Division of Cor			
ASJ RENT.	AL. LLC		
SUBJECT:			
		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:	
		Name of Person	
	ASJ RENTALS, LLC		
		Firm/Company	pany S Zip Code re annual report notification) 791-6161 Daytime Telephone Number ling Fee & Copy S60.00 Filing Fee, Certificate of Status &
	491 NW 45TH AVENUE	, ,	
		Address	
	PLANTATION, FLORIDA	x 33317	
		City/State and Zip Code	
	asjequities@gmail.com		
	E-mail address: (to be used for future annual report notif	ication)
For further information of	concerning this matter, please c	all:	
Lisa M. James	5		
		at ()	
Name o	of Person		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)	Certificate of Status & Certified Copy
Mailing Addres	···	Straat Address	
Registration :		Registration Sec	tion
Division of C		Division of Corp	
P.O. Box 632	27	The Centre of T	allahassee
Tallahassee.	FL 32314	2415 N. Monroe	Street Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ASJ RENTAL, 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 $\frac{03/13/2024}{}$ and assigned Florida document number ______ This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: ASJ RENTALS, LLC 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) 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

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.

City

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>	Type of Action
			□Add
			□Remove
			□Change
			□Add
			🗆 Change
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ffective date, if other than the da	ate of filing:		(option	al)
f an effective date is listed, the date must be Note: If the date inserted in this block	e specific and cannot be pri k does not meet the appl	or to date of filing or m icable statutory filir	iore than 90 days after fi ig requirements, this c	ling.) Pursuant to 605.0207 late will not be listed as i
document's effective date on the Depa			\$	
record specifies a delayed effective d	late, but not an effective	time, at 12:01 a.m.	on the earlier of: (b)	The 90th day after the
d is filed.				· · · · · · · · · · · · · · · · · · ·
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MARCH 28, Dated	2024			
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