# L24000198789

(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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## **COVER LETTER**

TO: Registration S Division of Co		
Third Day	Rentals LLC	
SUBJECT:	Name of Limited Liability Company	<del></del>
	Amendment and fee(s) are submitted for filing.	
Please return all corresp	ondence concerning this matter to the following:	
	Rebecca Aragon	
	Name of Person	<del></del>
	Third Day Rentals I.I.C	
	Firm/Company	
	128 Dinkla Ln	
	Address	
	Palatka FL 32177	PH SSEE
	City/State and Zip Code thirddayrentals@gmail.com	PH 2: 13 SSEE, FL
	E-mail address: (to be used for future annual report notification	
For further information of	concerning this matter, please call:	
Rebecca Aragon	432 889-7615	
Name o	of Person at () Area Code Daytime Tele	ephone Number
Enclosed is a check for t	he following amount:	
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & ☐ \$55.00 Filing Fee & Certificate of Status ☐ \$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

Street Address: Registration Section Division of Corporations The Centre of Tallahassee

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Third Day Rentals LLC		
(Name of the Lim	ted Liability Company as it now a (A Florida Limited Liability Compa	opears on our records.) my)
The Articles of Organization for this Limited I	iability Company were filed or	n 05/01/2024 and assigned
Florida document number L24000198789	·	
This amendment is submitted to amend the fol	lowing:	
A. If amending name, enter the new name of	of the limited liability compar	ıy here:
Aragon Ranch LLC		
The new name must be distinguishable and contain the	words "Limited Liability Company."	the designation "L.L.C." or the abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:	(-2) (-1) (-2)
Principal office address MUST BE A STRE	ET ADDRESS)	t n 1 − 1 − 1 − 1 − 1 − 1 − 1 − 1 − 1 − 1
		至其 四
		\$55 <u> </u>
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)		
		<u> </u>
B. If amending the registered agent and/or agent and/or the new registered office address.		ur records, <u>enter the name of the new regis</u>
Name of New Registered Agent:	Myrik Aragon	
New Registered Office Address:	128 Dinkla Ln	
	Enter	r Florida street address
	Palatka	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>	Address	Type of Action
AMBR Myrik Aragon		128 Dinkla Ln Palatka Fl. 32177	
		·	□Remove
			□Change
AMBR	Stephen Aragon		🗆 Add
			≣Remove
			□Change
AMBR	Rebecca Aragon		□Add
			<b>■</b> Remove
			□Change
			□Add
			Remove
			□Change
			- Remove
			3 Change.
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			□Change

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an effective <u>ote:</u> If the	e date is listed, the e date inserted	than the date of e date must be spe in this block do on the Departm	cific and cannot es not meet t	he applicable	ate of filing or statutory fili	more than 90 c ng requireme	_ (optiona lays after filir ents, this da	o i Pin	rsuant to not be	605.020 listed a
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