(Re	questor's Name)
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phor	ne #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Na	ime)
(Do	cument Number	7)
Certified Copies	_ Certificate	es of Status
Special Instructions to	Filing Officer:	
		J. HORNE JUN 12 2025

Office Use Only



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RECEIVED

TALLAHASSEE, FL 32309 (850) 524-5437 (850) 524-6243 Please use funds from the account: 120210000160: \$25.00 Authorized Signature TF RENTALS PROP LLC **Business Name** #Document ___Certified Copy of Articles of ___Certificate of Status Certified Copy of the Articles . Certificate of Status __ Profit Amendment Not for Profit Resignation of Member/MGR Resignation of Registered Agent LLC Revocation of Dissolution Domestication __ Conversion INC __Statement of Correction CORP PLLC Merger GP **DISSOLUTION REGISTRATION/QUALIFICATIONS** OTHER FILINGS ___ Foreign Filing TRANSMITTAL LETTER Partnership Reinstatement Fictitious Name -Articles of CORRECTION Withdraw of Certificate of Authority Statement of Authority business TRADEMARK Domestication APOSTIL COUNTRY Other EXAMINER'S INITIALS:

FLORIDA CAPITAL COURIER SERVICES, INC

2330 CLARE DRIVE

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: TF RENTALS PROP LLC Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Linda Thomas Name of Person
TFRENTALS PROPLLC
7350 NW75th St
Tamarac, Fl. 33321 City/State and Zip Code
Ceonny Od angi). Com E-mail address: (to be used for Editure annual report notification)
For further information concerning this matter, please call:
Johnny Thomas at (954) 756-1408 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\Bigcup \\$30.00 Filing Fee & \Bigcup \\$55.00 Filing Fee & \Bigcup \\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) \$\Bigcup \\$60.00 Filing Fee, Certified Copy (additional copy is enclosed)

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

Street Address:

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

IF RE	NTALS	S PACE	LLC
(Name of the Limited (A	Liability Company as it now appear Florida Limited Liability Company)	rs on our records.)	
The Articles of Organization for this Limited Liabi	• • • • • • • • • • • • • • • • • • • •	1	
Florida document number	1 L25000	0145259	8
This amendment is submitted to amend the following	ng:		
A. If amending name, enter the new name of th	e limited liability company h	ere:	[3]
The new name must be distinguishable and contain the word	s "Limited Liability Company," the d	designation "LLC" or the ab	breviation:"L.L.C."
Enter new principal offices address, if applicabl	e:		
(Principal office address MUST BE A STREET A	ADDRESS)		
			2. 59
Enter new mailing address, if applicable:	·		
(Mailing address MAY BE A POST OFFICE BO	<u></u>		
B. If amending the registered agent and/or registered agent and/or the new registered office address h		ecords, <u>enter the nam</u>	e of the new registered
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Floi	rida street address	
-	City	, Florida	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 amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Ma $AMBR = Au$	nager thorized Member	_	marac
<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Johnny Thomas	Address 7350 NW 75445+	_ MAdd 33321
			□Remove
			□Change
			□Add
		 	□Remov e
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			Change
			□Add
			□Remove
			Change
			□Add
			🗆 Remove
			Change

11 211	nending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	Johnny Thomas is the Creator Of
	Johnny Thomas is the Creator Of this business, and would like to be listed as CED, and Founder.
	We listed us CED and Founder
	19 19 19 19 19 19 19 19 19 19 19 19 19 1
ffec	tive date, if other than the date of filing:
Note	ffective 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 605.020 and the listed as a listed as
locui	ment's effective date on the Department of State's records.
reco	ord 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
	filed.
	(10/25
Dated	$\frac{6/10/25}{2025}$
	Signature of a member or authorized representative of a member
	Linda Thomas Typed or printed name of signee
	TINZICI TITUILLAS