P94000054537

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SEP O 1 2017 SEP O 1 2017 SEP O 1 2017

COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: Barsa Rentals Inc						
DOCUMENT NUMB	DOCUMENT NUMBER: P94000054537					
	of Amendment and fee are su	bmitted for filing.				
Please return all corres	pondence concerning this ma	tter to the following:				
	Joseph Bromm EA					
		Name of Contact Person	1			
	Junco & Kierzynski CPA					
•		Firm/ Company				
	5135 W Cypress St Suite 104					
•		Address	· · · · · · · · · · · · · · · · · · ·			
	Tampa FL 33607-1731					
-	City/ State and Zip Code					
IoeBri	omm@TampaBay.RR.com					
	-	sed for future annual report	notification)			
	D man address, to be at	ved for facility difficult report				
For further information	concerning this matter, pleas	e call:				
John E Barsa		at (813	294-7331			
Name o	of Contact Person	Area Co	de & Daytime Telephone Number			
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:			
■ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)			
Ame Divis	ing Address ndment Section sion of Corporations Box 6327	Amend Divisio	Address ment Section on of Corporations Building			

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Barsa Rentais Inc	ω_{α}
(Name of Corporation a	s currently filed with the Florida Dept. of State)
P94000054537	?
(Document	Number of Corporation (if known)
	tutes, this Florida Profit Corporation adopts the following amendme
A. If amending name, enter the new name of the corpor	
name must be distinguishable and contain the word "c" "Corp.," "Inc.," or Co.," or the designation "Corp." "I word "chartered," "professional association," or the abbr	The new orporation," "company," or "incorporated" or the abbreviation or "Co". A professional corporation name must contain the eviation "P.A."
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRES</u>	$\frac{N/A}{}$
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>)	N/A
D. If amending the registered agent and/or registered of new registered agent and/or the new registered office	
Name of New Registered Agent	N/H
	Florida street address)
New Registered Office Address:	. Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Register I hereby accept the appointment as registered agent. I am	
Signature	of New Registered Agent, if changing

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	PT	John Do	<u>oe</u>	
X Remove	<u>V</u>	Mike Jo	ones .	
X Add	<u>sv</u>	Sally Sr	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	Address
I) Change	V		Paul Barsa	1030 S Emerson St
x Add				Denver CO 80209
Remove				
2) Change		_		
Add				
Remove				
3)Change		_		
Add				
Remove				
4) Change	_	_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change		_		
Add				
Remove				

Attach additi	or adding additional a mal sheets, if necessar	y). (Be specific)	energy nerg.			
N/	9				<u> </u>	
						
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f an amendi	nent provides for an e	xchange, reclassi	fication, or cane	ellation of issued	d shares,	
provisions I (if not a	or implementing the a oplicable, indicate N/A	<u>(mendment if not</u>	contained in the	amend <u>me</u> nt itse	<u>:11:</u>	
NIA	1					
			<u>-</u>			
	· · · · · · · · · · · · · · · · · · ·					
						
						
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	08/25/2017	
The date of each amendment(s)	adoption:	, if other than the
date this document was signed.	•	
08 Effective date if applicable:	/25/2017	
Effective date if applicable.	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the I	block does not meet the applicable statutory filing requirements, this department of State's records.	ate will not be listed as th
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendment (sufficient for approval.	(s)
	pproved by the shareholders through voting groups. The following statem or each voting group entitled to vote separately on the amendment(s):	ent
"The number of votes ca	st for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
action was not required.	dopted by the board of directors without shareholder action and sharehold dopted by the incorporators without shareholder action and shareholder	er
08/25/17 Dated Signature	Jan	
selec	director, president or other officer – if directors or officers have not been ted, by an incorporator – if in the hands of a receiver, trustee, or other counted fiduciary by that fiduciary)	
	John E Barsa	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	