L08000070809

(Requ	uestor's Name)
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(City/	State/Zip/Pho	ne #)
PICK-UP	☐ WAIT	MAIL
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COVER LETTER

	Registration Se Division of Corp			
SUBJEC	Chris Holm	es Golf, LLC		
SUBJEC	1;	Name of Limi	ted Liability Company	
The enclo	sed Articles of	Amendment and fee(s) are subr	nitted for filing.	
Please ret	urn all correspon	ndence concerning this matter t	to the following:	
		Frank C. Whigham, Esquir	e	
			Name of Person	
		Stenstrom, McIntosh, Colb	ert & Whigham, P.A.	
			Firm/Company	
		1001 Heathrow Park Lane,	Suite 4001	
			Address	
		Lake Mary, FL 32746		
			City/State and Zip Code	
		danielle@stenstrom.com		
		E-mail address: (t	o be used for future annual report notific	cation)
For furthe	er information co	oncerning this matter, please ca	ıll:	
Frank C.	Whigham, Esqu	iire	407 322-2171 at ()	
	Name of	Person	Area Code Daytime	Telephone Number
Enclosed	is a check for th	e following amount:		
\$25.0	0 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

TO:

Registration Section **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ARTICLES OF O	RGANIZATION E
O	my as it now appears on our records. A SECRETARY OF STATE OF STAT
	OEC-1
Chris Holmes Golf, LLC	TAJECAC PA
(<u>Name of the Limited Liability Compa</u> (A Florida Limited I	invasit now appears on our records.
	or or one
The Articles of Organization for this Limited Liability Company	were filed on and assigned_a
Florida document number L08000070809	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	ility company here:
Top Venues Golf Travel, LLC	
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	12439 NE 48th Circle
(Principal office address MUST BE A STREET ADDRESS)	Oxford, FL 34484
Enter new mailing address, if applicable:	12439 NE 48th Circle
(Mailing address MAY BE A POST OFFICE BOX)	Oxford, FL 34484
B. If amending the registered agent and/or registered or registered agent and/or the new registered office address her	ffice address on our records, <u>enter the name of the new</u> e:
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	DI LI
	, 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 = Ma $AMBR = Au$	nager thorized Member		FILED	
<u>Title</u>	<u>Name</u>	Address	2016 DEC - 1 PH 45 1 SECRETARY DE STATE. TALLAHASSEE, FLORIDA	Type of Action
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	TALLAHARY OF CHI
	ASSEE. FLORIDA
	
	
	
 	
Effective date, if other than the date of fil	ling: (optional)
f 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 of meet the applicable statutory filing requirements, this date will not be listed as
The 90th day after the record is file	
Dated 28th Notember	_, 2016
	. ()

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Typed or printed name of signee

Filing Fee: \$25.00