

L11000081912

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

WAIT

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(Business Entity Name)

(Document Number)

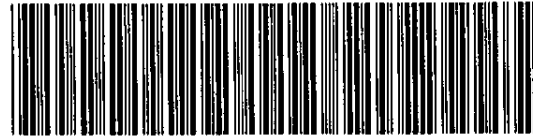
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STATE OF FLORIDA
DEPARTMENT OF REVENUE

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COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: DreamShare Vacations 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:

Robert J. Howells
Name of Person

Firm/Company

8621 Forest Run Lane
Address

Orlando Florida 32836
City/State and Zip Code

RS Howells@yahoo.com
E-mail address: (to be used for future annual report notification)

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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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For further information concerning this matter, please call:

Robert J. Howells at (407) 496-1646
Name of Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

\$25.00 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:
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

Dream Shore Vacations 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 7-18-2011 and assigned Florida document number L11000081912

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC," or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

8621 Forest Run Lane
Orlando Florida
32836

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

8621 Forest Run Lane
Orlando Florida
32836

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:

Robert J. Howells

New Registered Office Address:

8621 Forest Run Lane

Enter Florida street address

Orlando

Florida

32836

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 608, 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.

Robert J. Howells
If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

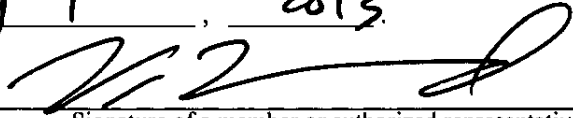
MGR = Manager
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Robert J. Howells	8621 Forest Run Lane Orlando Florida 32836	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGR	Jonathan Evans	22559 Nature Creek Frankfort Illinois 60423	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGR	Woo Ventures LLC	7380 Sand Lake Rd Suite 500 Orlando, FL 32819	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

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FLORIDA

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Dated July 1, 2013.



Signature of a member or authorized representative of a member

Vernon L. Toland for Wso Ventures LLC

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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DEPARTMENT OF REVENUE
TALLAHASSEE, FLORIDA

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