116000009634

(Re	equestor's Name)	
(Ac	ldress)	<u>.</u>
(Ac	ldress)	
(Ci	ty/State/Zip/Phone	- #N
		<u> </u>
PICK-UP	☐ WAIT	MAIL
(Ви	isiness Entity Nan	ne)
(Dr	ocument Number)	
(50	outhone Humbon,	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



300291538783

10/26/16--01016--018 **25.00



D. SCOTT OCT 2 8 2016

COVER LETTER

TO:

Registration Section

Registration Section

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32314

Division of Corporations
SUBJECT: Vacation Consultants International 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:
Danielle Bergne Name of Repson
Variation Consultants International UC
3 Cypress Branch Way Ste 108E
PAIM Coast, FL 32164 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
7
Danielle Bergne. at 386 597-9801 PAR STATE Area Code Daytime Telephone Number
Name of Person Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\Bigcup \$30.00 Filing Fee & Certificate of Status \$\Bigcup \$55.00 Filing Fee & Certificate of Status \$\Bigcup \$60.00 Filing Fee & Certificat
MAILING ADDRESS: STREET/COURIER ADDRESS:

Registration Section

Division of Corporations Clifton Building

Tallahassee, FL 32301

2661 Executive Center Circle

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Company as it now appears on our records.)

(A Honda Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on Oliginal and assigned Florida document number Liability Company were filed on Oliginal and assigned Florida document number Liability Company were filed on Oliginal and assigned Florida document number Liability Company were filed on Oliginal and assigned Florida document number Liability Company were filed on Oliginal and assigned Florida street above.

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

| Name of the Limited Liability Company were filed on Oliginal and assigned Florida street above.
| Name of the Limited Liability Company were filed on Oliginal and assigned Florida street address.

| Name of the Limited Liability Company were filed on Oliginal and assigned Florida street address.
| New Registered Agent: | New Registered Agent: | New Registered Office Address: | Enter Florida street address.

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.

City

If Changing Registered Agent, Signature of New Registered Agent

Florida

Zip Code

If amending Authorized Person(\$) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Authorized Member **Type of Action Address Title** Name 3Cypress Branch Way Add

Ste 108E Remove

Palm Coast, FL 32164 Change Harris, Aaron _ 🗆 Add _□ Remove _□ Change □ Add □ Remove ☐ Change ☐ Add □ Remove ☐ Change ☐ Add ☐ Remove ☐ Change

	r/p
_	
_	
ffactiv	e date, if other than the date of filing: (optional)
an effec	tive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant 605.0 the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed
l <u>ote:</u> li ocumei	the date inserted in this block does not meet the applicable statutory filing requirements, this date will ast be listed it's effective date on the Department of State's records.
	rd enceifier a delayed effective date, but not an effective time, at 12:01 a m. on the earlier
The 9	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier to determine the record is filed.
	LOS S
ated _	October 24th, 2016
aicu _	October 24th, 2016
	Borone's
	Signature of a member or authorized representative of a member
	Signature of a member of authorized representative of a member

Page 3 of 3

Filing Fee: \$25.00