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Division of Corporations

Fax Number : (850)617-6333

From:

Account Name : LARSON ACCOUNTING AND CONSULTING SERVICES LLC

Account Number : I20160000067 Phone : (407)370-3686 Fax Number : (407)370-3120

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: assistant2.larson@larsonacc.com

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08/24/2023 11:47 AM TO:18506176383 FROM:4073703120 Page: ARTICLES OF AMENDMENT (((H23000294418 3))) T() ARTICLES OF ORGANIZATION OF. Ľ REAL CLEANING SERVICES 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 __03/13/2019 ____ and assigned Florida document number <u>L.19000071068</u> This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: REAL VACATION HOMES LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC" 7600 MAJORCA PLACE, APT 5048 Enter new principal offices address, if applicable: ORLANDO, FL 32819 (Principal office address MUST BE A STREET ADDRESS) 7600 MAJORCA PLACE, APT 5048 Enter new mailing address, if applicable: ORLANDO, FL 32819 (Mailing address MAY BE A POST OFFICE BOX) 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: 7600 MAJORCA PLACE, APT 5048 New Registered Office Address: Enter Florida street address **ORLANDO** New Registered Agent's Signature, if changing Registered Agent: Thereby 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

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

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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 = Manager (((H23000294418 3)))

AMBR = Authorized Member

Title	<u>Name</u>	Address	Type of Action
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Effective date, if other than the illian effective date is listed, the date manual of the inserted in this I document's effective date on the list of the inserted in the list of	block does not meet the applicable status	(optional) iling or more than 90 days after filing.) Pursuant to 605.03 ory filing requirements, this date will not be listed
the record specifies a delayed effect ord is filed.	ive date, but not an effective time, at 12°	01 a.m. on the earlier of: (b) The 90th day after the
Dated AUGUST 24	2023	
		Sentative of a member

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