

L20000146597

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

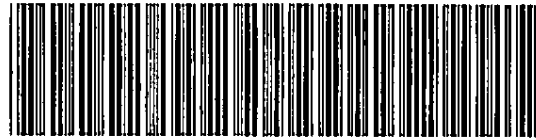
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000391331110

07/20/22--01014--000 **25.00

2022 JUL 20 PM 11:24

Ra Change

D CUCHING

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: NEXT STAY VACATION RENTALS LLC
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

BART SAUNDERS
Name of Person

LAW OFFICES OF SAUNDERS & SAUNDERS, PA
Firm/Company

7232 W. SAND LAKE ROAD, SUITE 202
Address

ORLANDO, FL., 32819
City/State and Zip Code

CARL@NEXTSTAYVACATIONRENTALS.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

CARL JOHNSON at (407) 705 7634
Name of Person Area Code & Daytime Telephone Number

Mailing Address:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Enclosed is a check for the following amount:

- \$25 Filing Fee \$55 Filing Fee & Certified Copy

42-11-11 03:59:33

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Name of the limited liability company: NEXT STAY VACATION RENTALS LLC

2. (a) 101 DIVINE DRIVE, SUITE 5A, OFFICE B
Principal office address of limited liability company:
(Note: MUST BE STREET ADDRESS)
DAVENPORT
FL 33897
11/06/2014

(b) 101 DIVINE DRIVE, SUITE 5A, OFFICE B
Mailing address of limited liability company:
(Note: MAY BE POST OFFICE BOX)
DAVENPORT
FL 33897
L20000146597

3. 11/06/2014 Date of filing/registration in Florida 4. L20000146597 Document number

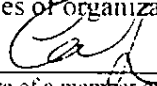
5. (a) LEGALINC CORPORATE SERVICES INC
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Office Address *(MUST BE FLORIDA STREET ADDRESS)*
5237 SUMMERLIN COMMONS, SUITE 400
FORT MYERS, FL 33907

(b) LAW OFFICE OF SAUNDERS & SAUNDERS, PA
Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:
7232 WEST SAND LAKE ROAD
NEW Registered Office Address:
SUITE 202
ORLANDO, FL 32819

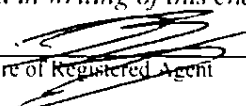
2012 OCT 29 11:24

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.


Signature of a member or authorized representative of a member

CARL JOHNSON
Printed or typed name of signee

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.


Signature of Registered Agent