DOCU	MENT #	1 000	00004571						
1. Entity Name STAY-N-PLAY RV RESORT, L.L.C.				diş.	•		FILE	n	
				, <i>·</i>					
Principal Plac	e of Business		Mailing Address				01 APR 27	PM 8 36	
			899 KNIGHTS TRAIL				SECRETARY O	FSTATE	
NOKOMIS FL	. 34275		NOKOMIS FL 34275				TALLAHASSEE,	ELUKIUA I Indi Kadi Indi Addi Addi	1 20002 1101 1002
2. Principal P	lace of Business		3. Mailing Address						
Suite, Apt. #, etc.			Suite, Apt. #, etc.				DO NOT WRITE	IN THIS SPACE	
City & State			City & State			4. F	4. FEI Number Applied For		
Zip Country		Zip		Country		36-4374865 Not Applicate 5. Certificate of Status Desired \$5.00 Additional		ot Applicable	
<u> </u>	6. Name and A	ddress of Currer	t Registered Agent	I	1		lame and Address of New Re	Fee Require	
			<u> </u>		Name				
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD					Street Ac	dress (P.O. B	ss (P.O. Box Number is Not Acceptable)		
		J HUAD							
PLANTATION FL 33324					City		1	FL Zip Coo	de
B. The above	named entity subm	its this statement	for the purpose of changing	it: register	ed office or	registered age	ent, or both, in the State of Flori	da.	
				-					
SIGNATURE .	Signature, typed or printer	t name of registered age	nt and title if applicable. (I	NOT : Registere	ed Agent signatu	re required when rei	instating)	DATE	<u> </u>
			FilsE	: : :	FEE IS \$	50:00			
	• ·		Make Check				e		
).	·		BERS/MEMBERS	10.		<u> </u>	ADDITIONS/C	HANGES	
D. TITLE	P970000	53982 1				P97000	052992		X Addition
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STREET ADDRESS	SARAGOT	78. FI. 3	1GR Delete sont Corporatio -, Suite 600 4236	CITY	-ST-ZIP	2033 SARAS	NAIN STREAT, S	36	
TITLE		<u></u>	Delete	17 mi	.E * .			Change	Addition
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								70101075-	-UU4 ∗⊆ũ ůů
STREET ADDRESS					(-ST-ZIP		-05/15	CO 013	
STREET ADDRESS City - St - Zip	-	<u></u>	Delete	CITY 	(-ST-ZIP .E		-U5/15 *****	50.00 ****** Change	Addition
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STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS	 		Delete	CITY TITL NAM STR	(-ST-ZIP .E		-05/15 *****	50.00 本林林神	Addition
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