

From:

11/02/2017 16:55

#711 P.001/004

Division of Corporations

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LO260021304

Florida Department of State

Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : COGENCY GLOBAL, INC.
Account Number : 120000000089
Phone : (800) 221-0102
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**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
SUMMER BAY VACATIONS, L.C.**

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D. SCOTT

NOV 3 2017

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Corporate Filing Menu

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From:

11/02/2017 16:55

#711 P.002/004

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

Summer Bay Vacations, L.L.C.

(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 September 18, 2002 and assigned
Florida document number L02000024304.

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 contain 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**)

Enter new mailing address, if applicable:

(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:

Cogency Global Inc.

New Registered Office Address:

115 N. Calhoun Street, Suite 4

Enter Florida street address

Tallahassee

Florida

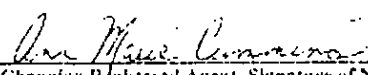
City

32301

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 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

#711 P.003/004

MGR = Manager
AMBR = Authorized Member

Change
Add
Remove
Change
Add

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#711 P.004/004

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FALLHARBSE

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated November 1, 2017

Typed or printed name of signer