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EXAMINER

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COVER LETTER

TO: Registration Section Division of Corpo	ion rations			
SUBJECT:		K CITY GUIDE LLC ed Liability Company	···	
The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following:				
		KERRY J JACKSON Name of Person		
	FRONT DESK CITY GUIDE LLC			
	Firm/Company			
	16208 LULLWATER DR			
	Address			
	PANAMA CITY BCH, FL 32413 City/State and Zip Code			
	kerryjackson1@live.com E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:				
	/ J JACKSON	at \	249-5227	
Name of F	erson	Area Code & Daytime	: Telephone Number	
Enclosed is a check for the following amount:				
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy (additional copy is enclosed)	
	NG ADDRESS: tion Section	STREET/COURI Registration Sectio		

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

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

HOTEL REFLECTIONS 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					
This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liabi	lity company here:				
A. If affecting name, only the new name of the militer me.					
The new name must be distinguishable and end with the words "Limit "L.L.C."	ed Liability Company," the designation "LLC" or the abbreviation				
Enter new principal offices address, if applicable:	16208 LULLWATER DR				
(Principal office address MUST BE A STREET ADDRESS)	PANAMA CITY BCH, FL 32413				
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	16208 LULLWATER DR PANAMA CITY BCH, FL 32413				
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here					
Name of New Registered Agent:					
New Registered Office Address:	T AS : Q :				
New Registered Office Address.	Enter Florida street address				
	City , Florida Zip Code				
New Registered Agent's Signature, if changing Registered Agent:					
I hereby accept the appointment as registered agent and agr the provisions of all statutes relative to the proper and comp accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office company has been notified in writing of this change.	lete performance of my duties, and I am familiar with and provided for in Chapter 608, F.S. Or, if this document is				

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records: MGR = Manager MGRM = Managing Member <u>Title</u> <u>Name</u> **Address Type of Action** ☐ Add Remove \square Add ☐ Remove ☐ Add ☐ Remove Remove ∐Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) 2009 DECEMBER 14 Dated Signature of a member or authorized representative of a member

Typed or printed name of signee
Page 2 of 2

KERRY'J JACKSON

Filing Fee: \$25.00