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EXAMINER

L. SELLERS

MAY -8 2008

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2008 MAY -5 AM IO: 49
SECRETARY OF STATE

COVER LETTER

}
TO: Registration Section Division of Corporations
SUBJECT: Paradise Dream Vacations (Name of Limited Liability Company)
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Tonathan Gurdyal (Name of Person)
Paradise Dream Vacations
(Firm/Company) 7777 A Davie Rd. Ext. Suite 100 A (Address)
Holly wood Fl. 33024 (City/State and Zip Code)
For further information concerning this matter, please call: Arthony Gordy A at (954, 655-7918 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\ \times \\$30.00 Filing Fee \& \times \\ \text{Certificate of Status} \\ \text{Certified Copy} \\ \text{(additional copy is enclosed)} \\ \text{Certified Copy} \\ \text{(additional copy is enclosed)} \\ (additional copy i

MAILING ADDRESS:

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

STREET/COURIER ADDRESS:

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

Or .						
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 liability company here:						
The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."						
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: Name of New Registered Agent:						
New Registered Office Address: 12112 ST. Andrews Place (Enter Florida street address)						
Mirmay, Florida 33025 (City) (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 608, 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) Page 1 of 2						
Page 1 of 2						

If amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager

MGRM = Mai	naging Member			
<u>Title</u>	<u>Name</u>	^	Address	Type of Action
MCRM	Janet	(AurdyA)	4730 madison st. Holly wood, Fl. 330	Add Premove
			4730 modison St.	□ Add
				Add Remove
				Add Remove
				Add Remove
				Add Remove
D. If amendin	-	tion, enter change(s) here: (Attach additional sheets, if necesso	ury.)
Dated	Ant	homes (F	Twadya L	2008 HAY -5 AH SECILE FARY OF TALLAHASSEE, F
_	Sig		authorized representative of a member Of O	AMIO: 49 FLORIGE
			inge a Ula	

Filing Fee: \$25.00