L08000033605

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B JUN 19 PM [2:]

T. HAMPTON
JUN 2 0 2008

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations						
SUBJECT: Unique Vacation Rentals, LLC, (Name of Limited Liability Company)						
(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:						
Richard Brown (Name of Person)						
(Firm/Company)						
10343 E. Co. Huy. 30A E305 (Address)						
Paname C: ty Beach FL. 324/3 (City/State and Zip Code)						
For further information concerning this matter, please call:						
Mame of Person) at (850) 399-0570 (Area Code & Daytime Telephone Number)						
Enclosed is a check for the following amount:						
\$25.00 Filing Fee Certificate of Status Certificate of Status Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)						

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 AMENDM!	ENT	98 32 1A1	
ARTICLES	OF ORGANIZA	TION	LLAHA	
(Name of the Limited Liability (A Florida Li	OF On Rentals Company as it now soli mitted Liability Compan	ears on our records.)	I ARY OF STATE STA	FILED
The Articles of Organization for this Limited Liability Co		4/2/08	and assigned	
Florida document number <u>L 08000033600</u>	5.			
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limit	ed liability company	here:		
The new name must be distinguishable and end with the word "L.L.C."	s "Limited Liability Cor	npany," the designation "L	LC" or the abbrevia	tion
Enter new principal offices address, if applicable:	,	······································		
(Principal office address MUST BE A STREET ADDRE	7.555)			A-114
Enter new mailing address, if applicable: (Mailing address MAY RE A POST OFFICE BOX)				
B. If amending the registered agent and/or registered agent and/or the new registered office addre	red office address o ss here:	our records, <u>enter th</u>	ie name of the n	EV
Name of New Registered Agent:	Brian /), Jeffs		_
New Registered Office Address:), Jeffs 1e55 (Enter Florida street addi	ress)	-	
,		, Florida		_
New Registered Agent's Signature, if changing Registered	(Clty) Agent:		(Zip Code)	
hereby accept the appointment as registered agent an he provisions of all statutes relative to the proper and accept the obligations of my position as registered age seing filed to merely reflect a change in the registered company has been notified in writing of this change.	complete performant nt as provided for in office address, I here	ce of my duties, and I an Chapter 608, F.S. Or, ti	n familiar with an f this document is ited Hability	rei

Page 1 of 2

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

MGRM = N	Managing Member		·
<u>Title</u>	<u>Name</u>	Address	Type of Action
<u>MGRM</u>	Brian A. Jeffs	762 Jacqueline Lane Palm Harbor, Fl. 34683	Add Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
	Tene 17 , 2		PILED OR JUN 19 PH 12: 24 SECRETARY OF STATE SECRETARY OF STATE SECRETARY OF STATE OR JUN 19 PH 12: 24
	Richard L.	Brown ed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00