

Division of Corporations
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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

Account Number : 110432003053 Phone : (561)694-8107 Fax Number : (561)694-1639

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

AREAS USA DCA, LLC

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SECHETARY OF STATE

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C. LEWIS 0CT 2 2 2009

EXAMINER

н09000225316

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF FILED 02/03

2009 OCT 24 AM 8: 52

SECRETARY OF STATE TALLAHASSEE, FLORIDA

Area	as USA DCA, LLC		· ·
(Name of the Limited Liabil	ity Company as it now appea a Limited Liability Company)	rs on our records.)	
(31110)	a Danner Liabany Camping)		•
The Articles of Organization for this Limited Liability	Company were filed on	05/13/2008	and assigned
Florida document number L08000047660			
Troude document number	•		
This amendment is submitted to amend the following:			
This afficience is submitted to differe the following.		•	
A. If amending name, enter the new name of the li	mited liability company he	re:	
	·		
The new name must be distinguishable and end with the v "L.L.C."	vords "Limited Liability Comp	any," the designation "I	LC" or the abbreviation
Enter new principal offices address, if applicable:			,
(Principal office address MUST BE A STREET AD	DRESS)	·	
	<u> </u>		
Enter ways mailing address if contactles			•
Enter new mailing address, if applicable:			<u></u>
(Mailing address MAY BE A POST OFFICE BOX)		·	
		· · · · · · · · · · · · · · · · · · ·	······································
	•		
B. If amending the registered agent and/or reg	pistered office address on	our records, enter 1	the name of the new
registered agent and/or the new registered office a	<u>aaress nere</u> :		
Name of New Registered Agent:			·
New Projectored Office Address			
New Registered Office Address:	F	nter Florida street ada	Iress
	Zing, cay, and stice, man 433		
·		, Florida	·
	· 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

H09000225316

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:

itle	Managing Member <u>Name</u>	<u>Address</u>	Type of Action
/P	MARK TAITT	5301 BLUE LAGOON DRIVE SUITE 690 MIAMLEL 33126	Add Remove
<u>′P</u>	David Flaherty	5301 BLUE LAGOON DRIVE SUITE 690 MIAMLEL 33126	Add Remove
			Add Remove
	·		Add
			Add Remove
-			Add
. If ame	ading any other information, ente	r change(s) here: (Attach additional sheets, if necessar	y.)
 			
ated	October 21	2009	2009 OCT SECRET
		member or authorized representative of a member ABELL, by Diana Urrago as ATTY-IN- FACT Typed or printed name of signee	21 ARY SS
		Page 2 of 2	M & 52 OF STATE