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COVER LETTER

Registration Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

TO:

SUBJECT:	YACHT,	AIRCRAFT & RV FINANCI	NG, LLC	
SOBJECT.		Name of Lim	ited Liability Company	
The enclosed	Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return a	ali correspo	ndence concerning this matter	to the following:	
		PHILIP & TRACEY BAR	THOLOMEW	
			Name of Person	
		YACHT, AIRCRAFT & R	V FINANCING, LLC	
			Firm/Company	<u> </u>
		1024 S.E. 9TH STREET		
			Address	
		FORT LAUDERDALE, F	LORIDA 33316	
			City/State and Zip Code	
		traceybart5@gmail.com		
			to be used for future annual rep	ort nottication)
For further in	formation c	oncerning this matter, please ca	all:	
PHILIP R. BARTHOLOMEW			954 303-2 at ()	
	Name o	f Person	Area Code	Daytime Telephone Number
Enclosed is a	check for th	ne following amount:		
□ \$25.00 Fi	iling Fee	■ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclos	S60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
	ling Addres		<u>Street Addı</u> Registrati	ress: on Section
		orporations		of Corporations

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

YACHT, AIRCRAFT & RV FINANCE LLC

(Name of the Limite	ed Liability Company as it now appears (A Florida Limited Liability Company)	s on our records.)			
The Articles of Organization for this Limited Li Florida document number 1.09000010065	ability Company were filed on Jan	uary 30, 2009 and assigned			
This amendment is submitted to amend the follo	owing:				
A. If amending name, enter the new name of	the limited liability company he	<u>re</u> :			
N/A					
The new name must be distinguishable and contain the we	ords "Limited Liability Company," the do	signation "LLC" or the abbreviation "L.L.C."			
Enter new principal offices address, if applica	able: N/A				
(Principal office address MUST BE A STREE	T ADDRESS)				
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE I	N/A B <i>OX</i>)	2021 OCT 2			
B. If amending the registered agent and/or reagent and/or the new registered office address		ecords, enter the name of the new registere			
Name of New Registered Agent:	Name of New Registered Agent: TRACEY BARTHOLOMEW				
New Registered Office Address:	1024 SE 9TH STREET	-11			
		ida street address			
	FORT LAUDERDALE City	, Florida 33316			

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 Rogistered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	TRACEY BARTHOLOMEW	1024 S.E. 9th STREET	≣Add
		FORT LAUDERDALE, FLORIDA 33316	□Remove
		 -	□ Change
			□Remove
			□ Grange
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cord speci filed.	ifies a delayed effective	e date, but no	t an effectiv	e time, at 12	:01 a.m. on the	carlier of: (b)	The 90th d	lay after t
ed	OCTOBER 20		2021					
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		Signature of a	member or as	thorized repr	esentative of a m	ember		