L09000011195

| (Re | equestor's Name) | |
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| (Ac | ddress) | |
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| (C | ity/State/Zip/Phone | e #) |
| PICK-UP | ☐ WAIT | MAIL |
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| (Bi | usiness Entity Nan | ne) |
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| Certified Copies | Certificates | of Status |
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| Special Instructions to | Filing Officer: | |
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Office Use Only



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SECRETARY OF STATE

N. 0- JUN 1 9 2009

COVER LETTER

| TO: Registration S Division of Co | Section orporations | • | | | |
|-----------------------------------|--|--|--|--|--|
| SUBJECT: | LCH \ | /egas, LLC | | | |
| | | d Liability Company | | | |
| The enclosed Articles of | of Amendment and fee(s) are subn | nitted for filing. | | | |
| Please return all corresp | pondence concerning this matter to | o the following: | | | |
| | | Elizabeth Beck | | | |
| | | Name of Person | | | |
| | LCH Vegas, LLC | | | | |
| | | Firm/Company | | | |
| | 425 1 | North Federal Highway | | | |
| | Address | | | | |
| | Hallandale, FL 33009 | | | | |
| | | City/State and Zip Code | | | |
| | E-mail address: (to | y.beck@sunvest.com be used for future annual report notifica | ation) | | |
| For further information | concerning this matter, please cal | - | | | |
| Betsy Beck Name of Person | | at (_954_)922-6 | 070 ext. 239 Telephone Number | | |
| Enclosed is a check for | the following amount: | | | | |
| \$25.00 Filing Fee | \$30.00 Filing Fee & Certificate of Status | S55.00 Filing Fee & Certified Copy (additional copy is enclosed) | \$60.00 Filing Fee, Certificate of Status & 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



June 9, 2009

ELIZABETH BECK 425 NORTH FEDERAL HIGHWAY HALLANDALE, FL 33009

SUBJECT: VACATION INVESTMENT PLAN, LLC

Ref. Number: L09000011195

We have received your document for VACATION INVESTMENT PLAN, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Section 608.406, Florida Statutes, was amended effective July 1, 2007, to require the name of a limited liability company to be distinguishable from the names of all other filings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. Adding of Florida or Florida to the end of the name is not acceptable. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must end with the words Limited Liability Company, the abbreviation L.L.C., or the designation LLC. The word Limited may be abbreviated as Ltd. and the word Company may be abbreviated as Co. The following suffixes are no longer acceptable: Limited Company, L.C., and LC.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6067.

Neysa Culligan Regulatory Specialist II

Letter Number: 709A00019327

Vacation Investment Plan, Inc.

Corporate Office: 425 North Federal Highway Hallandale, Florida 33009 (954) 922-6070 / fax (954) 921-5080

June 12, 2009

Florida Department of State Division of Corporations PO Box 6327 Tallahassee, FL 32314

Attn: Ms. Neysa Culligan, Regulatory Specialist II

Dear Ms. Culligan,

I have submitted the attached form requesting a name change for a limited liability company named LCH Vegas, LLC to Vacation Investment Plan, LLC. The request for the name change was rejected due to its similarity to another existing entity. I am assuming that the existing entity is Vacation Investment Plan, Inc. That corporation is one of our group of companies. It is our intent to transfer its assets to this new LLC of similar name and dissolve the existing corporation. I spoke with someone in your office who said that as long as the two entities were connected, that the name change would not be rejected. It is not our intent that both entities would operate simultaneously; we wish to replace the corporation with the LLC.

Based upon the above, please reconsider our request for the name change.

Very truly yours,

Elizabeth Beck, CFO

Elizabeth teck

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| L | CH Vegas, LLC | | |
|--|---|----------------------|---|
| (Name of the Limited Liabi (A Florid | lity Company as it now appe la Limited Liability Company | ars on our records.) | |
| The Articles of Organization for this Limited Liability Florida document number | Company were filed on | February 3, 2009 | and assigned |
| This amendment is submitted to amend the following | : | | |
| A. If amending name, enter the new name of the li | imited liability company h | ere: | |
| | n Investment Plan, LLC | | |
| The new name must be distinguishable and end with the v "L.L.C." | words "Limited Liability Com | | · |
| Enter new principal offices address, if applicable: | | | SEGRI |
| (Principal office address MUST BE A STREET AD | DRESS) | · | ART C |
| Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | | | O9 JUN 18 AH 9 14 SECRETARY OF STATE ALLAHASSEE FLORIDA |
| B. If amending the registered agent and/or regregistered agent and/or the new registered office and Name of New Registered Agent: New Registered Office Address: | ddress here: | | e name of the new |
| | | , Florida | 7: 0.1 |
| | 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

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 = Ma MGRM = N | nnager Managing Member | • | |
|----------------------|----------------------------|---|---------------------|
| <u>Title</u> | <u>Name</u> | <u>Address</u> | Type of Action |
| | | | Add Remove |
| | | | Add Remove |
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| | | | Add ☐Remove |
| | | | Add Remove |
| D. If amen — | ding any other information | n, enter change(s) here: (Attach additional sheets | if necessary.) |
| _ | | | JUN 18 A |
| Dated | June 5 | 2009 | AN 9: 14 EE FLORIDA |
| | <u> </u> | ure of a member or authorized representative of a mem | ber |
| | | Elizabeth Beck Typed or printed name of signee | |

Page 2 of 2

Filing Fee: \$25.00