## 1000080930

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

Office Use Only

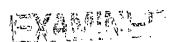


000209107250

06/20/11--01014--018 \*\*25.00

11 IIIN 20 PH 3: 04

T. HAWPTON
JUN 21 2011



## **COVER LETTER**

TO:	Registration Se Division of Cor				
SUBJI	CT:	Timesha	re Venues LLC		
		Name of Limit	ed Liability Company	***************************************	
The en	closed Articles of	Amendment and fee(s) are sub-	mitted for filing.		
Please	return all correspo	ondence concerning this matter	to the following:		
Derrick Howden					
			Name of Person		
		10	011 E Colonial Drive		
			Address		
			Orlando Fl 320803	-	
			City/State and Zip Code		
	derrick@timesharevenues.com  E-mail address: (to be used for future annual report notification)				
For fur	ther information c	oncerning this matter, please ca	·		
	Der Name o	rick Howden	at ( 407 ) 8	326-1907	
	Name	rerson	Area Code & Daytime	тезерлоне минисе	
Enclose	ed is a check for th	e following amount:			
\$25	.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

THEO SECRETARY OF STATE DIVISION OF CORPORATIONS

11 JUN 20 PM 3: 04

	Timeshare Venues LLC		
(Na	me of the Limited Liability Company as it now appe (A Florida Limited Liability Company	ars on our records.)	
The Articles of Organization	for this Limited Liability Company were filed on	08/02/2010	and assigned
Florida document number	110000080930		
This amendment is submitted	to amend the following:		
A. If amending name, enter	the new name of the limited liability company he	e <u>re</u> :	
The new name must be distingu "L.L.C."	ishable and end with the words "Limited Liability Comp	pany," the designation "L	LC" or the abbreviation
Enter new principal offices	address, if applicable:		
(Principal office address MU	ST BE A STREET ADDRESS)		
	<del></del>		
Enter new mailing address,	if applicable:		
(Mailing address MAY BE A			
	ered agent and/or registered office address on new registered office address here:	our records, enter the	ne name of the new
Name of New Regis	tered Agent:		
New Registered Offi			<del></del>
	E	nter Florida street addr	ess
	City	, Florida	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

**COVER LETTER** 

TO:

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

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Derrick Howden	319 Havelock Street Orlando, Fl 32824	Add ☐ Remove
<u>VP</u>	Lyndsay Howden	319 Havelock Street Orlando, Fl 32824	☐ Add ☑ Remove
VP	Caple Howden	530 Lanyard Lane Debarry Fl 32713	Add Remove
D	Lundsay Howden	319 Havelock Street Orlando, Fl 32824	Add Remove
<del> </del>			Add Remove
			Add Remove
D. If amen	nding any other information, enter	change(s) here: (Attach additional sheets, if necessary.)	SECRETARY OF STATE
Dated	6/16/2011 ,	Harden 1	# OKS
	Signature of a m		<del> </del>
		Derrick Howden Typed or printed name of signee	<del></del>

Page 2 of 2

Filing Fee: \$25.00