L11000013896

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COVER LETTER

TO: Registration Sect Division of Corpo		j.			
CHDIECT.	VONK EN	TERPRISES LLC			
SUBJECT:	Name of Limited Liability Company				
	mendment and fee(s) are sub				
	MONIQUE VONK Name of Person				
VONIK ENTERPRISES LLC					
	VONK ENTERPRISES LLC Firm/Company				
2200 E. IRLO BRONSON MEMORIAL HIGHWAY SUITE 107					
	Address				
KISSIMMEE, FL 34744					
	City/State and Zip Code				
MONIQUE@EXCELLENTVACATIONHOMES.COM E-mail address: (to be used for future annual report notification)					
For further information con	acerning this matter, please c	•			
REME	BERT VONK	at (_407_)	870-2242		
Name of I	Person	Area Code & Daytim	e Telephone Number		
Enclosed is a check for the	,				
\$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)		
Registrat Division P.O. Box	IG ADDRESS: ion Section of Corporations 6327 see, FL 32314	STREET/COURI Registration Section Division of Corpo Clifton Building 2661 Executive Co Tallahassee, FL 32	on rations enter Circle		

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED 12 APR 30 AM IT: 00

VONK ENTERS		FALLAHA	SSEE, FLORIDA
(<u>Name of the Limited Liability Compan</u> (A Florida Limited Li	y as it now appears ability Company)	on our records.)	CE, FEURIDA
The Articles of Organization for this Limited Liability Company v	were filed on	02/02/2011	and assigned
Florida document number <u>L11000013896</u> .			
This amendment is submitted to amend the following:			
A. If amending name, <u>enter the new name of the limited liabi</u>	lity company here	:	
The new name must be distinguishable and end with the words "Limite" L.L.C."	ed Liability Compan	y," the designation "L	LC" or the abbreviation
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)			
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
			
B. If amending the registered agent and/or registered offi registered agent and/or the new registered office address here		ir records, <u>enter ti</u>	ne name of the new
Name of New Registered Agent:			
New Registered Office Address:			
	Ente	r Florida street addr	ess

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.

City

If Changing Registered Agent, Signature of New Registered Agent

Florida

Zip Code

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> **Address Type of Action** <u>Name</u> MGR HOLDER, PEGGY J 3753 MAYO CIRCLE ☐ Add ✓ Remove ORMOND BEACH, FL 32174 ☐ Add Remove ☐ Add ☐ Remove ☐ Add Remove ∏Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) April 25 2012 Dated _____ Signature of a member or authorized representative of a member REMBERT VONK Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00