Division of Corporations Electronic Filing Cover Sheet

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(((H11000070648 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

L. SELLERS

MAR 18 2011

From:

Account Name : BUSINESS FILINGS

Account Number : 105256001620

Phone : (608)827-5300

Fax Number : (608)827-5501 **EXAMINER** 

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email	Address:	jamesrabd@aol	COR
	***********	[ Campar Strate and a	

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN ALL RESORT SERVICES GROUP LLC

Certificate of Status	_
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

Electionic Filing Menu

Corporate Filing Menu

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

All Resort Services Group LLC					
(Name of the Limited L (A F	lability Company as it now appears on knide Limited Liability Company)	our records.			
•					
The Articles of Organization for this Limited Liab	bility Company were filed on 2/8/2011	<del></del>	and a	ssigned	ļ.
Florida document number L11000016603	<del></del>	•			
This amondment is submitted to amend the follow	ring:				
A. If amending name, enter the new name of t	he limited liability company here:				
The new name must be distinguishable and end with "L.L.C."	the words "Limited Liability Company,"	the designation "L	LC" or the	e abbrev	riation
Enter new principal offices address, if applicat	ole:			· · · · · · · · · · · · · · · · · · ·	
Principal office address MUST BE A STREET	ADDRESS)		<del></del>		
·	·	<del></del>			
Enter new mailing address, if applicable:					
Mailing address MAY BE A POST OFFICE BO	220				
				· · · · · · · · · · · · · · · · · · ·	_
B. If amending the registered agent and/or registered agent and/or the new registered office		records, enter th	le hame	of the	new
resistered strutt and/or the new repairered offic	e address nere:		₹ss		
					em <del>re</del> i
Name of New Registered Agent:			<del>- 2</del> 7	<del>- 35</del> -	
New Registered Office Address:			AS A		
	Enter F	lorida street addr	441-K	<b>&gt;&gt;</b>	
		, Florida	<u> </u>		
	City		2000	de	
New Registered Agent's Signature, if charging Re-	elstered Agent:		<u> </u>	*	
			-		

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

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## tax 1111 000 1001 - 0

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

Title	Name	Address	Type of Action
MGRM	Terry Richardson	1600 South Hwy 27, Apt 902, Clermont, FL 34711	Add Remove
			D Add
			D Add D Remove 
<del></del>			Cl Add O Remove
·	** ·		Add Remove
	·		O Add O Remove
D. Ifan	nending any other Information, en	ter change(s) here: (Attach additional sheets, if necessary.)	
			<del></del>
			<del></del> .
Dated	March 17	, 201	
	Signature of	a member or authorized representative of a member	- <del></del>
	Mark Roeseman, Member		· <del></del>
		Typed or printed name of signee	

Page 2 of 2 Filing Fee: \$25.00

Fox#H 110000706483