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T. HAMPTON

## **COVER LETTER**

TO:	Registration Section Division of Corporations
SUBJI	Resort Management LLC Name of Limited Liability Company
The en	closed Articles of Amendment and fee(s) are submitted for filing.
Please	return all correspondence concerning this matter to the following:
	John Dab Son Name of Person
	Team Martiet Group LLC
	20 E. Central Ave
	Orlando, Fl. 3280
	John G Teammartectaroup, com E-mail address: (to be used for future annual report notification)
For fu	rther information concerning this matter, please call:
	Name of Person at (402) 496-7234  Area Code & Daytime Telephone Number
Enclos	sed is a check for the following amount:
\$25	5.00 Filing Fee  Certificate of Status  Certificate of Status  Certified Copy (additional copy is enclosed)  Certified Copy (additional copy is enclosed)  Certified Copy (additional copy is enclosed)

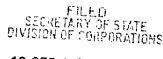
MAILING ADDRESS:

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



12 SEP 1 0 PM 1:51

(Name of the Limited)	Management 1. C. Liability Company as it now appears on our records.) Florida Limited Liability Company)
The Articles of Organization for this Limited Liz Florida document number LNO0093	· · · /
This amendment is submitted to amend the follo	wing:
A. If amending name, enter the new name of	the limited liability company here:
The new name must be distinguishable and end with "L.L.C."	n the words "Limited Liability Company," the designation "LLC" or the abbreviation
Enter new principal offices address, if applica	able:
(Principal office address MUST BE A STREE)	T ADDRESS)
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE I	BOX)
B. If amending the registered agent and/or the new registered of	or registered office address on our records, enter the name of the new fice address here:
Name of New Registered Agent:	John Dobson
New Registered Office Address:	20 E. Contral Blva Enter Florida street address
	Orlando, Florida 3280 City Zip Code
New Registered Agent's Signature if changing R	egistered Agent

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 = Manager

MGRM = Managing Member Title **Type of Action** Name | **Address** <u>MGRM</u> Remove MGRM ☐ Add Remove Add Remove □Add Remove  $\square$ Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Signature of a member or authorized representative of a member John Dobson
Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00