L11000136886

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COVER LETTER

TO:

Registration Section
Division of Corporations

YOLDRY VACATIONS LLC

SUBJECT:

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

JOSE INFANTE

Name of Person

YOLDRY VACATIONS LLC

Firm/Company

1912 THETFORD CIRCLE

Address

ORLANDO, FL 32824

City/State and Zip Code

INFO@ABRAHAMFINANCIAL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JOSE INFANTE

at (321) 697-2348

Name of Person

Area Code & Daytime Telephone Number

Enclosed is a check for the 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

YOLDRY VACATIONS LLC (Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on 12/05/2011 and assigned Florida document number_L11000136886 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: YOLDRY PROPERTY MANAGEMENT LLC The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." 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 office address on our records, enter the name of the new registered agent and/or the new registered office address here: ODRY VARGAS Name of New Registered Agent: New Registered Office Address: Enter Florida street address

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 Shapter 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 3

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
MGRM	JOSE INFANTE	5451 MILLENIA LAKE BLVD	Add
		ORLANDO, FL 32839	Remove
MGR	JOEL JR NEGRON	5451 MILLENIA LAKE BLVD)
		ORLANDO, FL 32839	Remove
MGRM	ODRY VARGAS	13950 Landstar blvd	
		Orlando, FL 32824	Remove-
MGR	YOLALY INFANTE	13950 Landstar blie	TO TE
		Orlando, FL 32824	Remove
			Add
			Remove
			Add
			Remove

D. If amending any other information, en	ter change(s) here: (Attach additional sheets, if necessary.)
THÈ AMENDING WILI	L BE EFFECTIVE ON JANUARY 1, 2014
	
Dated JANUARY 1,	2014
	1087
Signature	a member of authorized representative of a member
JOSE INFANTE	, , <u> </u>
	Typed or printed name of signee

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Filing Fee: \$25.00

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