112000081612

(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:





200254592622

12/16/13--01006--017 **25.00

DEC 17 2013 T CLINE

SECRETARY OF THE SAME

Dinsmôre

Legal Counsel.

DINSMORE & SHOHL LLP 255 East Fifth Street ^ Suite 1900 ^ Cincinnati, OH 45202 www.dinsmore.com

Jill M. Scherff (513) 977-8109 (direct) ^ (513) 977-8141 (fax) jill.scherff@dinsmore.com

Certified Specialist in Estate Planning, Trust and Probate Law

December 12, 2013

Florida Department of State Registration Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

RE: The Quest Florida Keys LLC

Dear Sir or Madam:

Enclosed is one original and one copy of the Articles of Amendment to Articles of Organization for The Quest Florida Keys LLC, along with a check in the amount of \$25.00 for the required filing fee. Please file and return a file-stamped copy to me in the enclosed envelope. Thank you for your attention to this matter.

Sincerely,

Jill M∕Scherff

JMS/rrc

Enclosures

2604723v1

COVER LETTER

TO: Registration Section
Division of Corporations

Surgect: The Quest Florida Keys LLC

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:

Jill M. Scherff, Esq.

Name of Person

Dinsmore & Shohl, LLP

Firm/Company

255 E. Fifth Street, Ste. 1900

Address

Cincinnati, OH 45202

City/State and Zip Code

jill.scherff@dinsmore.com

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

For further information concerning this matter, please call:

Jill Scherff

513,977-8109

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 Tallahassec, 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

The Quest Florida Keys 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 June 20, 2012 and assigned Florida document number <u>L12000081612</u> This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Dream Quest Florida Keys 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: Name of New Registered Agent: New Registered Office Address: Enter Florida street address , Florida

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 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
			Add
			Remove
			
			Add
			Remove
			Add
			Remove
			Add r
			Remove
			25 C C C C C C C C C C C C C C C C C C C
			Add
			Remove
<u></u>			Add
		·	Remove

any other n	formation, enter change(s) here: (Attach additional sheets, if necessary.)
	, , , , , , , , , , , , , , , , , , , ,
118	, 2013
	Signature of a member or authorized representative of a member Chris Paressan Typed or printed name of signee
	

Page 3 of 3

Filing Fee: \$25.00

ACLAHEAR OLD SIZE