

L12000100438

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

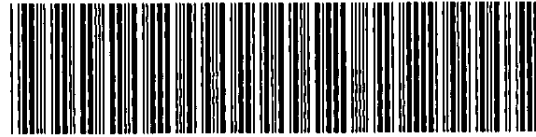
(Business Entity Name)

(Document Number)

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08/10/12--01012--005 **25.00

12 AUG 10 PM 12:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED

D. BRUCE

AUG 13 2012

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: STAYCATION SOLUTIONS 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:

ROBERT WHITNEY JR
Name of Person

STAYCATION SOLUTIONS LLC
Firm/Company

1608 N. FORT HARRISON AVE
Address

CLEARWATER FL 33755
City/State and Zip Code

ROBERT@STAYCATIONSOLUTIONS.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ROBERT WHITNEY JR at (727) 290-7497
Name of Person Area Code & Daytime Telephone Number

12 AUG 10 PM 12:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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AND
FILED

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**

STAYCATION SOLUTIONS 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 08/03/2012 and assigned Florida document number L12000100438

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

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**)

1608 N. FORT HARRISON AVE
CLEARWATER FL 33755

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:

1608 N. FORT HARRISON AVE
Enter Florida street address
CLEARWATER, Florida 33755
City Zip Code

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:

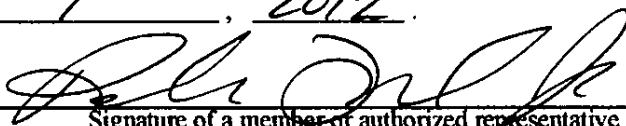
MGR = Manager
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	KEITH R. WEISER	PO Box 1144 NEW PORT RICHEY FL 34656	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	KEITH R. WEISER	PO Box 1144 NEW PORT RICHEY FL 34656	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

PLEASE REMOVE: KEITH R. WEISER AS
MANAGER/MEMBER AND AMMEND TO
KEITH R. WEISER AS MANAGER

Dated AUGUST 7, 2012



Signature of a member or authorized representative of a member

ROBERT WHITNEY JR.

Typed or printed name of signee

12 AUG 10 PM 12:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED