

42000104108

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

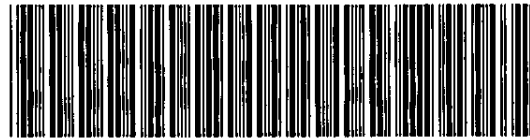
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000254568560

12/31/13--01017--004 **25.00

RECEIVED
13 DEC 31 AM 3:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

me

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Destin Pointe Rentals and Real Estate Sales, 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:

Jonathan Wright
Name of Person
Alternative tax Strategies
Firm/Company
972 Broken Arrow Ln
Address
Cantonment, FL 32533
City/State and Zip Code
Alternative tax strategies.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jonathan Wright at 850, 460-5277
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**

(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 8/13/2012 and assigned
Florida document number L12000104108

RECEIVED
TALLAHASSEE, FLORIDA
DEC 31 PM 3:04
2012

This amendment is submitted to amend the following:

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

Alternative Tax Strategies, 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)

972 Broken Arrow Ln
Cantonment FL
32533

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

972 Broken Arrow Ln
Cantonment FL
32533

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:

Jonathan ~~Wright~~ Wright

New Registered Office Address:

972 Broken Arrow Ln

Enter Florida street address

Cantonment, Florida 32533
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.

Jonathan Wright
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	Jonathan J. M. Wright	972 Broken Arrow Ln Cantonment, FL 32533	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	Kathleen M. Allen	28581 Old Town Front Street, Suite 102, Temecula, CA 92590	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	Lyndsey Seltzer	28581 Old Town Front Street, Suite 102, Temecula, CA 92590	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
	Jonathan J. Wright	985 Hwy 98 E. STE H Destin, FL 32541	<input type="checkbox"/> Add <input checked="" 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.)

Dated

12 / 16

2013

Signature of a member or authorized representative of a member

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

13 DEC 31 AM 3:04
SECRET
TALLAHASSEE, FLORIDA