

L13000 138995

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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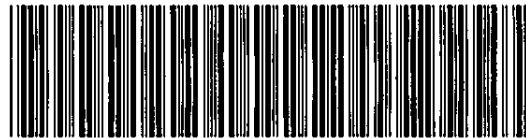
(Business Entity Name)

(Document Number)

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THE KINGSBURY FIRM, LLC

November 6, 2013

Registration Section
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

Re: Florida Palm Vacation Rentals, LLC


Dear Sir or Madam:

Enclosed please find one original and one copy of the Articles of Amendment along with a check in the amount of \$25.00 for the filing fee. The changes consist of changing the unit number from 303 to 301 in the principal office address, registered office address, and the managing member's address.

Please file the original document and return a "filed" stamped copy to my office using the return envelope provided. Should you have any questions or concerns, please do not hesitate to contact me.

Very Truly Yours,

The Kingsbury Firm, LLC


Amanda A. Bowen

AAB:rs
Enclosures

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Florida Palm Vacation Rentals, LLC

Name of Limited Liability Company

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

Please return all correspondence concerning this matter to the following:

Atty. Amanda Bowen

Name of Person

The Kingsbury Firm, LLC

Firm/Company

709 Milwaukee Street, Ste. A

Address

Delafield, WI 53018

City/State and Zip Code

aab@kingsburyfirm.com

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

For further information concerning this matter, please call:

Amanda

Name of Person

at (262) 352-9019

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**

Florida Palm Vacation Rentals, 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 10/02/13 and assigned
Florida document number L13000138995.

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)

6029 Trophy Drive

#301

Naples, FL 34110

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:

Jeff Raizer

New Registered Office Address:

6029 Trophy Drive, #301

Enter Florida street address

Naples

City

Florida 34110

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	Jeff Raizer	6029 Trophy Drive	<input type="checkbox"/> Add
		#301	<input type="checkbox"/> Remove
		Naples, FL 34110	<input checked="" type="checkbox"/> Amend Address
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<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.)*

Dated November 6, 2013

Amanda A. Bowen

Signature of a member or authorized representative of a member

Amanda A. Bowen

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

13 NOV 12 AM 11:25
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MILLAN, MISSOURI