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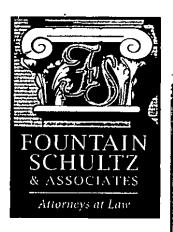
COVER LETTER

TO:	Registration S Division of Co			
SUBJEC		h Vacation Homes, LLC		
SUBJEC		Name of Lin	nited Liability Company	
The encl	osed Articles of	f Amendment and fee(s) are sub	omitted for filing.	
Please re	turn all corresp	ondence concerning this matter	to the following:	
		Kerry Anne Schultz, Esq.		
			Name of Person	
		Fountain, Schultz & Associ	ciates, PL	
			Firm/Company	
		2045 Fountain Professiona	al Ct., Suite A	
			Address	
		Navarre, Florida 32566		
			City/State and Zip Code	
		kaschultz@fountainlaw.com		
		E-mail address: (to be used for future annual report not	ification)
For further	er information o	oncerning this matter, please co	ali:	
Kerry An	ne Schultz		850 939-3535 at ()	
	Name o	f Person		e Telephone Number
Enclosed	is a check for th	ne following amount:		
\$25.0	0 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	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



KENNETH R. FOUNTAIN KERRY ANNE SCHULTZ SCOTT C. BRIDGFORD

VIA REGULAR U.S. MAIL

Department of State **Division of Corporations** Corporate Filings P.O. Box 6327 Tallahassee, FL 32314

Re: Inlet Beach Vacation Homes, LLC - Articles of Amendment

Dear Sir or Madam:

Enclosed please find the original and one copy of the Articles of Amendment to Articles of Organization regarding the above entity. Also enclosed is a check in the amount of \$25.00 for filing.

Please return a filed copy to me in the enclosed pre-addressed, stamped envelope.

Please let me know if you have any questions. Thank you for your assistance in this matter

Sincerely,

Fountain, Schultz & Associates, P.L.

Kerry Anne Schultz, Esquire

KAS:amf **Enclosures**

2045 FOUNTAIN PROFESSIONAL CT. Surre A

NAVABRE, FLORIDA 32566 Teu: (850) 939-3535 Fax: (850) 939-3539

SANTA ROSA BEACH TEL: (850) 622-2700 Eax: (850) 622-2722



ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

Inlet Beach Vacation Homes, 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 December 9, 2013 Florida document number L13000169796 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 contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." Enter new principal offices address, if applicable: 46 Mason Avenue (Principal office address MUST BE A STREET ADDRESS) Santa Rosa Beach, Florida 32459 Enter new mailing address, if applicable: 46 Mason Avenue (Mailing address MAY BE A POST OFFICE BOX) Santa Rosa Beach, Florida 32459 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: Kerry Anne Schultz 2045 Fountain Professional Ct., Suite A New Registered Office Address: Enter Florida street address Navarre Florida 32566

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 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, Lhereby 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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
AMBR AMBR	Diana Tibbs, as Co-Trustee of The Tibbs Revocable Trust,	46 Mason Avenue	
	dated January 20, 2017	Santa Rosa Beach, Florida 32459	□ Remove
			■ Change
	Michael Tibbs, as Co-Trustee of The Tibbs Revocable Trust, dated January 20, 2017	46 Mason Avenue	
		Santa Rosa Beach, Florida 32459	□ Remove
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ii an effe	ve date, if other than the d ective date is listed, the date must be If the date inserted in this blocent's effective date on the Den	e enecific and a		o date of filing o	more than 90 d	ays after filing.)	Pursuant to 605.020
docume	ent's effective date on the Dep	artment of Sta	te's records.	Die statutory n	ung requireme	nts, this date w	ill not be listed a
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