L1400082201

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL.
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



100275608601

08/03/15--01028--019 **60.00

15 AUG -3 PH 4: 58

AUG 0 5 2015 Y SULKER

COVER LETTER

;

Divi	ision of Corp	porations		
SURIFCT:	ISLAND G	ETAWAY INVESTORS, LLC	2	r.
SOBJECT		Name of Limi	ited Liability Company	
The enclosed	Articles of A	Amendment and fee(s) are sub-	mitted for filing.	
Please return	all correspoi	ndence concerning this matter	to the following:	
		Name of Limited Liability Company cles of Amendment and fee(s) are submitted for filing. Orrespondence concerning this matter to the following: Martha L. Pickett Name of Person ISLAND GETAWAY INVESTORS, LLC Firm/Company 4255 Randon Ln. Address Merritt Island, Fl. 32952 City/State and Zip Code nationalmarty@gmail.com E-mail address: (to be used for future annual report notification) ation concerning this matter, please call: Name of Person Area Code Daytime Telephone Number		
			Name of Person	
		ISLAND GETAWAY INV	ESTORS, LLC	
			Firm/Company	
		4255 Randon Ln.		
			Address	
		Merritt Island, Fl. 32952		
			City/State and Zip Code	
SUBJECT: SUBJECT: Name of Limited Liability Company				
	ISLAND GETAWAY INVESTORS, LLC Name of Limited Liability Company Inclosed Articles of Amendment and fee(s) are submitted for filting. Inclosed Articles of Amendment and fee(s) are submitted for filting. Martha L. Pickett Name of Person ISLAND GETAWAY INVESTORS, LLC Firm/Company 4255 Randon Ln. Address Merritt Island, Fl. 32952 City/State and Zip Code nationalmarty@gmail.com E-mail address: (to be used for future annual report notification) arther information concerning this matter, please call: tha L. Pickett 321 795-3117 at ()			
For further in	nformation ed	oncerning this matter, please ea	ill:	
Martha L. Pi			at (
	Name of	Person	Area Code Daytime	Telephone Number
Enclosed is a	check for th	e following amount:		
□ \$25.00 F	iling Fee		Certified Copy	Certificate of Status & Certified Copy

MAILING ADDRESS:

TO:

Registration Section

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 Lim	ited Liability Company as it now a (A Florida Limited Liability Comp	ppears on our records.) any)
The Articles of Organization for this Limited I	• •	n May 13, 2014 and assigned
This amendment is submitted to amend the fol		
A. If amending name, enter the new name of the limited liability company here:		
The new name must be distinguishable and contain the	, , ,	'the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:	·
<u>(Principal office address MUST BE A STRE</u>	ET ADDRESS)	
Enter new mailing address, if applicable:		15
(Mailing address MAY BE A POST OFFICE	<u> </u>	ं के कि
		8 w : **
		me P III
B. If amending the registered agent and	I/or registered office addres	ss on our records, enter the name of the new
registered agent and/or the new registered of	office address here:	58 58 58
Name of New Registered Agent:	Martha L. Pickett	
New Registered Office Address:	4255 Randon Ln.	
	Ente	er Florida street address
	Merritt Island	. Florida ³²⁹⁵²

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, I hereby confirm that the limited liability company has been notified in writing of this change.

City

f Changing Registered Agent, Signature of New Registered Agent

Zip Code

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

Title	<u>Name</u>	Address	Type of Action
MGR	Rodger A. Pickett	4255 Randon Ln, Merritt Island, Fl.	Add
			■ Remove
			☐ Change
			Add
			Remove
			Change
			Add
			Remove AND Change
			P Add TO S 8 Remove
			☐ Change
			Add
			Remove
			☐ Change
			□ Add
			□ Remove
			☐ Change

<u> </u>			
			_
			_
			_
			_
			_
			-
			_
			_
			_
			_
-			_
		± Julian Market	
	$\overline{}$	<u> </u>	- [* -
		m _c ro	and services
			- ++++
		Section 1	-
		∞	
			_
ffective date, if other than the date of filing:	10	optional)	
netuve date, ii otnet than the date of fillies.	te of filing or more than 90 days	after filing.) Pursuant to 60.	
an effective date is listed, the date must be specific and cannot be prior to da		this date will not be list	ted as
an effective date is listed, the date must be specific and cannot be prior to da lote: If the date inserted in this block does not meet the applicable	statutory filing requirements,		
an effective date is listed, the date must be specific and cannot be prior to da lote: If the date inserted in this block does not meet the applicable	statutory filing requirements,		
an effective date is listed, the date must be specific and cannot be prior to da lote: If the date inserted in this block does not meet the applicable ocument's effective date on the Department of State's records.			
an effective date is listed, the date must be specific and cannot be prior to da lote: If the date inserted in this block does not meet the applicable ocument's effective date on the Department of State's records. e record specifies a delayed effective date, but not an		01 a.m. on the earli	ier of
an effective date is listed, the date must be specific and cannot be prior to da Note: If the date inserted in this block does not meet the applicable occument's effective date on the Department of State's records. The 90th day after the record is filed.		01 a.m. on the earli	ier of
'an effective date is listed, the date must be specific and cannot be prior to da lote: If the date inserted in this block does not meet the applicable occument's effective date on the Department of State's records. e record specifies a delayed effective date, but not an The 90th day after the record is filed.)1 a.m. on the earli	ier of
'an effective date is listed, the date must be specific and cannot be prior to da lote: If the date inserted in this block does not meet the applicable occument's effective date on the Department of State's records. e record specifies a delayed effective date, but not an		01 a.m. on the earli	ier of
an effective date is listed, the date must be specific and cannot be prior to date. If the date inserted in this block does not meet the applicable ocument's effective date on the Department of State's records. e record specifies a delayed effective date, but not an The 90th day after the record is filed.)1 a.m. on the earli	ier of

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00