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COVER LETTER

TO:	Registration Se Division of Cor								
		BELT VILLA RENUALS LLC							
SUBJE		Name of Lim	ited Liability Company						
The encl	losed Articles of	Amendment and fee(s) are sub	mitted for filing.						
Please re	etum all correspo	ndence concerning this matter	to the following:						
		Morgan Hila							
			Name of Person	 					
		Woods, Weidenmiller, Mi	chetti & Rudnick, LLP						
			Firm/Company						
		9045 Strada Stell Court, 4th Floor							
		Address							
		Naples/FL 34109							
			City/State and Zip Code						
		mhila@lawtirmnaples.com							
		E-mail address: (to be used for future annual report notif	ication)					
For furth	ner information c	oncerning this matter, please e	ail:						
Morgan	Hila		239 325-4070 at ()						
	Name o	f Регмоп		Telephone Number					
Enclosed	d is a check for th	ne 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 Tullahussee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

VANDERBILT VILLA RENTALS LLC		
(Name of the Limited Liability Co. (A Florida Limit	normy as It now appears on our rec ed Liability Company)	urds.)
The Articles of Organization for this Limited Liability Compa	my were filed on 67/10/2014	and assigned
Florida document number 1.14000109498		
This amendment is submitted to amend the following:		
The Articles of Organization for this Limited Liability Company were filed on 67/10/2014 and assigned Florida document number 1.14000109498 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 "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
The new name must be distinguishable and contain the words "Limited Li	iability Company," the designation "l	J.C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)	<u> </u>	
		ALC OR
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		27 0
D. If amonding the projection of the state of		70
b. It amending the registered agent and/or registered registered agent and/or the new registered office address between the property of the		rds, enter the name of the news
		· 7
Name of New Registered Agent:		•,
New Registered Office Address:		
The new name must be distinguishable and contain the words "Lin Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADD) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered agent and/or the new registered office address to the new registered office address and/or the new registered office address.	Enter Florida street ada	lress
		Florida
	Cuy	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 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.

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	Marianne Ljungberg	Strandpromenaden 89	
		SALTSJO-DUVNAS 13150 SE	Remove
			Change
			Add
			C Remove
			Change
			D Add
			☐ Remove
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<u>ite:</u> lf i	date, if other ive date is listed, t the date inserted t's effective date	d in this bloc	k does not r	neet the appl	icable statu	filing or more tory filing re	(o than 90 days i quirements,	ptional) ifter (iling.) F this date w	Pursuant to 605.0 ill not be listed	207 l as
recor The 90	rd specifies a Oth day after	delayed or the recor	effective of the filed.	date, but n	ot an eff	ective tim	e, at 12:0	1 a.m. oi	n the earlier	· of
Se ted	ptember 12			. 2019						
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