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Office Use Only

COVER LETTER

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TO: Registration Section Division of Corporations

ORLANDO AREA4.UNURY RENTALS, LLC SUBJECT: _____

Name of Limited Liability Company

The enclosed Articles of Amendment and feets) are submitted for filing.

Please return all correspondence concerning this matter to the following:

ANDREW GREENSTEIN

Name of Person

ANDREW GREENSTEIN TRUST

Firm/Company

9512 OAK ISLAND LANE

Address

CLERMONT, FLORIDA 34711

City/State and Zip Code

andrew@orlandoarealuxuryrentals.com

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

For further information concerning this matter, please call:

Enclosed is a check for the following amount:

 \square \$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 tadditional copy is enclosed)

Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 <u>Street Address:</u> Registration Section Division of Corporations The Centre of Tallahassee 2415 N, Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

OREANDO AREA LUXURY RENTALS, LLC

(<u>Name of the Limited Liability Compar</u> (A Florida Limited L	iv as it now appears on our records.) Tability Company)
The Articles of Organization for this Limited Liability Company Florida document number <u>1.14000177289</u> .	were filed on <u>11/14/2014</u> and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabi	
ORLANDO AREA LUXURY RETREATS, LLC	
The new name must be distinguishable and contain the words "Limited Liabili Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	ty Company." the designation "LLC" or the abbreviation "L_C."
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, <u>enter the name of the new registered</u> agent and/or the new registered office address here:

Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street ac	udress
	Cits	, Florida

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. Thereby 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, <u>enter the title, name, and address of each person-being added</u> or removed from our records:

MGR = Manager

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AMBR = Authorized Member

<u>Title</u>	Name	Address	<u>Type of Action</u>
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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(optional)

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(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

MAY 6	2020
Dated	
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	Signature of a member of authorized representative of a member

ANDREW GREENSTEIN

Typed or printed name of signee