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(Re	questor's Name)	
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S. YOUNG

COVER LETTER

TO: Registration Solvision of Co	ection rporations	*	
RENOV	O VACATIONS, LLC.		
SUBJECT:	Name of Lin	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspondent	ondence concerning this matter	to the following:	
	DANILO SANTANA		
		Name of Person	
	US TAX CONSULT	ING INC	
		Firm/Company	
	5401 S KIRKMAN F	RD STE 105	ূ্ৰ ক
		Address	
	ORLANDO, FL 328	19	
	SUPPORT@USTAX	City/State and Zip Code	ication)
	_	to be used for future annual report notif	ication)
For further information of	concerning this matter, please c	all:	Sep. 2
SANCHEZ ANTUI	NES, FLAVIO	407 674-8969	
Name o	of Person		Telephone Number
Enclosed is a check for t	he 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

RENOVO VACATIONS, LLC.		
(Name of the Limited Liability Com (A Florida Limite	pany as it now appears on our records.) d Liability Company)	
The Articles of Organization for this Limited Liability Compartions of Organization for this Limited Liability Compartions of Comparting Comparts of Comparting Comparts of Comparting Comparts of Com	ny were filed on 01/15/2015	and assigned
nis amendment is submitted to amend the following:		
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 L	iability 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)		34 14
		開門開工
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		1300 T
		5 to 5
3. If amending the registered agent and/or registered registered agent and/or the new registered office address h		enter the name of the
Name of New Registered Agent:		
New Registered Office Address:	Estan Elanda atrace al disease	
	Enter Florida street address	
	, Flor	ida Zip Code
	City	Lip Coue

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 the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR =	Manager	1
AMBR =	Authorized	Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	S.SINGNORETI,FABIANA	11483 BRICKYARD POND LANE	
		WINDERMERE, FL, 34786, US	■ Remove
			Add
			□ Remove
		-\. 2-\. 2\.	G 56
			□ Remove
			□ Remove
			□ Add
			Remove
			Add
			□ Remove

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ective date, if other effective date must be seed this document is fi	er than the date of filing: (optional specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after filed by the Florida Department of State)
ed Stemph	· 10 · · · · · · · · · · · · · · · · · ·
	Kluckest.
	ignature of a member or authorized representative of a member
FABIANA	ignature of a member or authorized representative of a member A SANTOS SINGNORET! Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00