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SECRETARY OF STATE

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COVER LETTER

	Registration Se Division of Cor						
SUBJEC	MY FL 404	II, LLC					
SOBJEC		Name of Limited Liability Company					
The enclo	osed Articles of	Amendment and fee(s) are sub	mitted for filing.				
Please ret	turn all correspo	ndence concerning this matter	to the following:				
		Eric T. Salpeter, Esq.					
		 	Name of Person				
		Salpeter Gitkin, LLP					
			Firm/Company				
		l East Broward Blvd., Suit	te 1500				
			Address	·			
,		Ft. Lauderdale, FL 33301					
			City/State and Zip Code				
		Eric@salpetergitkin.com					
		E-mail address: (to be used for future annual report notific	eation)			
For further	er information co	oncerning this matter, please co	all:				
Eric T. S	alpeter, Esq.		954 467-8622 at ()				
- "	Name o	Person	Area Code Daytime	Telephone Number			
Enclosed	is a check for th	e following amount:					
\$25.0	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

FILED 2015 OCT 23 PM 4: 1

MY FL 4041, LLC	, SE	CRETATE PH 4: 18			
(<u>Name of the Limited Liability Compa</u> (A Florida Limited I	ny as it now appears on our records Liability Company)	AHASSEE. FLORE			
The Articles of Organization for this Limited Liability Company Florida document number <u>L15000048325</u>	were filed on	and assigned			
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limited liab	ility company here:				
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC" or the	he abbreviation "L.L.C."			
Enter new principal offices address, if applicable:	3711 N. Ocean Blvd.				
(Principal office address MUST BE A STREET ADDRESS)	E414-1- EL 22200				
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	3711 N. Ocean Blvd. Fort Lauderdale, FL 33308				
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here. Name of New Registered Agent:		ter the name of the new			
New Registered Office Address:	Enter Florida street address , Florida				
	City	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>	<u>Name</u>	Address	Type of Action
MGR	Rentals Vacation Property LLC	3711 N. Ocean Blvd.	□ Add
		Fort Lauderdale, FL 33308	□ Remove
			☐ Change
			Add
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			TALLAH ARY Chaffee
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effective da	te, if other than	: the date of f e must be specifi	iling: c and cannot be	prior to date o	filing or more th	l qo) nan 90 days aft	t ional) er filing.) Pursuant to	605.02
te: If the	date inserted in th	iis block does r	not meet the ap	plicable stat	utory filing rec	uirements, th	is date will not be	listed
ument's e	ffective date on t	ne Department	of State's reco	ords.				
record s	specifies a del	ayed effective	ve date, but	not an ef	fective time	, at 12:01	a.m. on the ea	arlier
he 90th	day after the	record is fil	led.					
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		Signature	of a member or	authorized re	resentative of a	member		

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Filing Fee: \$25.00