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Florida Department of State  
Division of Corporations  
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To:

Division of Corporations  
Fax Number : (850)617-6383

From:

Account Name : BARKER WILLIAMS, PLLC  
Account Number : I20170000030  
Phone : (850)308-7033  
Fax Number : (850)308-7115

\*\*Enter the email address for this business entity to be used for future  
annual report mailings. Enter only one email address please.\*\*

Email Address: info@hillcolemancpa.com

2021 JUL 12 PM 4:26

ALL INFORMATION IS UNCLASSIFIED  
DATE 20210712 BY SP

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN**

**30A ESCAPES REALTY, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$25.00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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BB7/13/21

## COVER LETTER

TO: **Registration Section**  
**Division of Corporations**

SUBJECT: 30A Escapes Realty LLC  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Amy D. Coleman

Name of Person

Hill Coleman LLC

Firm/Company

12805 US Highway 98 E, Ste B202

Address

Inlet Beach, FL 32461

City/State and Zip Code

info@hillcolemancpa.com

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

2021 JUL 12 PM 12:49  
 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

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For further information concerning this matter, please call:

<u>Amy D. Coleman</u>	<u>850</u>	<u>659-2375 ext 101</u>
<u>Name of Person</u>	<u>at (</u>	<u>Area Code</u>
	<u>)</u>	<u>Daytime Telephone Number</u>

Enclosed is a check for the following amount:

<input checked="" type="checkbox"/> \$25.00 Filing Fee	<input type="checkbox"/> \$30.00 Filing Fee & Certificate of Status	<input type="checkbox"/> \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	<input type="checkbox"/> \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
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**Mailing Address:**

Registration Section  
 Division of Corporations  
 P.O. Box 6327  
 Tallahassee, FL 32314

**Street Address:**

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**

30A ESCAPES REALTY, LLC

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 04/07/2015 and assigned Florida document number L15000061211.

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 "L.L.C."

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)

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent:

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>	<u>Address</u>	<u>Type of Action</u>
MGR	Jeff Johnston	3152 Boxley Valley Road	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change
		Franklin, TN 37064	<input type="checkbox"/> Remove
MGR	Travis Wilburn	102 Lauren Lane	<input type="checkbox"/> Add
		Santa Rosa Beach, FL 32459	<input checked="" type="checkbox"/> Remove <input type="checkbox"/> Change
MGR	Camille Dixon	23011 Front Beach Road, Unit 34	<input type="checkbox"/> Add
		Panama City Beach, FL 32413	<input type="checkbox"/> Remove <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

E. Effective date, if other than the date of filing: July 15, 2021 (optional)

Effective date, if other than the date of filing: \_\_\_\_\_ (optional)  
(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.

Dated July 12 2021

----- DocuSigned by:

Camille Dixon

www.6CEU26551002426

Signature of a member or authorized representative of a member

Camille Dixon

Typed or printed name of spouse