

**L15000210909**

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

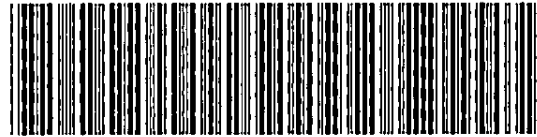
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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09/16/20--01016--024 \*\*825.00

09/16/20 16:17:00

OCT 24 2020

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: DELAND LODGE INVESTORS, LLC

\_\_\_\_\_  
Name of Limited Liability Company

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

Please return all correspondence concerning this matter to the following:

JOHN C VICK III

\_\_\_\_\_  
Name of Person

DELAND LODGE INVESTORS, LLC

\_\_\_\_\_  
Firm/Company

496 S. HUNT CLUB BOULEVARD

\_\_\_\_\_  
Address

APOPKA, FL 32703

\_\_\_\_\_  
City/State and Zip Code

CAROLYN@V3CAPGROUP.COM

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

For further information concerning this matter, please call:

CAROLYN STANLEY

407

848-1663

at (\_\_\_\_\_)

\_\_\_\_\_  
Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the 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 Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

100 100 100 100

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

This amendment is submitted to amend the following:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

APOPKA, FL 32703

APOPKA, FL 32703

\_\_\_\_\_, Florida \_\_\_\_\_  
*City* *Zip Code*

**If Changing Registered Agent, Signature of New Registered Agent**



1890

(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)

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 AUGUST 31 2020

*J. V. Smith*

Signature of a member or authorized representative of a member

JOHN C VICK III

Typed or printed name of signee

**Filing Fee: \$25.00**