

L16000 140513

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

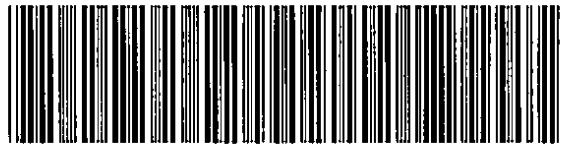
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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06/10/19--01022--002 **25.00

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CLERK OF STATE
DIVISION OF CORPORATIONS
19 JUN 10 PM 12:30

Amend

JUN 22 2019

D CUSHING

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: RESORT F&B SERVICES 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:

RICHARD EASTMENT

Name of Person

RESORT F&B SERVICES LLC

Firm/Company

8618 TALLFIELD AVE

Address

ORLANDO, FL 32832

City/State and Zip Code

RICH@RESORTFB.COM

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

For further information concerning this matter, please call:

RICHARD EASTMENT

407 451-3156
at () _____
Area Code Daytime Telephone Number

Name of Person

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) |
|--|--|--|--|

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
19 JUL 10 PM 12:30

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

RESORT F&B SERVICES 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 JULY 26, 2016 and assigned
Florida document number L16000140513

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 "L.L.C." or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

8618 TALLFIELD AVE

ORLANDO, FL 32832

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

8618 TALLFIELD AVE

ORLANDO, FL 32832

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:

RICHARD EASTMENT

New Registered Office Address:

8618 TALLFIELD AVE

Enter Florida street address

ORLANDO

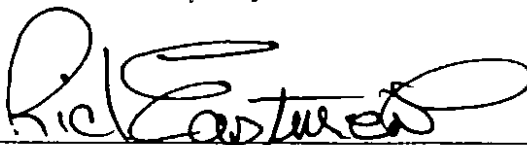
City

Florida 32832

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>
OWNER	RONALD HALE	7091 GRAND NATIONAL DRIVE	<input type="checkbox"/> Add
		SUITE 104	<input checked="" type="checkbox"/> Remove
		ORLANDO, FL 32819	<input type="checkbox"/> Change
OWNER	RICHARD EASTMENT	8618 TALLFIELD AVE	<input checked="" type="checkbox"/> Add
		ORLANDO, FL 32832	<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
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

[illegible]

E. Effective date, if other than the date of filing: _____ (optional)

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.

Dated JUNE 06 2019

Rick Estler

RICHARD EASTMENT

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Filing Fee: \$25.00