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T. MATTHEWS DEC -8 2021

COVER LETTER

TO: Registration S Division of Co			
DESTINA SUBJECT:	ATION FLORIDA. LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles o	f Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	George Mantzidis, Esq,		
		Name of Person	
	George Mantzidis, Attorne	y at Law, PLLC	
		Firm/Company	
	5150 Tamiami Trail, Ste. #	503	
		Address	<u> </u>
	Naples, FL 34103		
		City/State and Zip Code	
	george@gmanlaw.com		
	E-mail address: (to be used for future annual report not	ification)
For further information	concerning this matter, please ca	all:	
George Mantzidis		239 438-4609	
Name	of Person	Area Code Daytin	ne 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 Addr		Street Address:	
Registration Section		Registration Section Division of Corporations	
Division of P.O. Box 63	Corporations	Division of Co The Centre of	•

2415 N. Monroe Street. Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF 21 10 22 FH 3: 23

DESTINATION FLORIDA, 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 Con Florida document number L16000176184	npany were filed on 09/21/2016	and assigned
Plorida document number	•	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limite	d liability company here:	
The new name must be distinguishable and contain the words "Limited	d Liability Company," the designation "LL	C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRE	<u></u>	
		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered of agent and/or the new registered office address here:	office address on our records, <u>ente</u>	r the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street uddr	ess
	, F	Florida Zip Code
	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: ny 3: 23

MGR = Manager

AMBR = A	Authorized Member	21 832 22 177 0	
<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	JONATHAN A. BIRK	4855 SW 7157 Way	\alpha Add
		4855 SW 715+ Way Faintsville, FL 32608	□Remove
		32608	□Change
			□Add
			□ Remove
			□ Change
			□Add
			□Remove
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	<u> </u>	□Remove	
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_ Change

	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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Effect	ive date, if other than the date of filing: (optional)
lfan ef Note:	fective 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 (If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as t
docun	nent's effective date on the Department of State's records.
	rd 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
rd is f	
Dated	15 NOVEMBER, 2021
	Signature of a member or authorized representative of member
	5,5,
	MARILYN WODLINGER
	Typed or printed name of signee

Filing Fee: \$25.00