

L16000228/24

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2017 AUG 18 PM 2:45
STONE MOUNTAIN
TALLAHASSEE, FL 32301

K. SALY

AUG 21 2017

Joey Nick Ristick

1315 US Hwy 17 92 W, Haines City, FL 33844 | 407-432-8087 | budgetrvs4u@gmail.com

7/19/17

Registration Section
Division of Corporations
P.O BOX 6327,
Tallahassee, Fl 32314

Dear Registration Section :

My name is Joey Ristick, the new Manager of Budget RV's LLC. My daytime telephone number is 407-432-8087 and the return address would be 1315 US Hwy 17 92 W, Haines City, FL 33844. Feel free to contact me with any questions or concerns.

Sincerely,

Joey Nick Ristick

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Budget RV'S 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:

Joey Nick Pistick
Name of Person

Budget RV'S LLC
Firm/Company

1315 US Hwy 17 92, Suite B
Address

Haines City, FL 33844
City/State and Zip Code

budgetrvs4u@gmail.com
Email address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Joey Nick Pistick at (407) 432-8067
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/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

Budget RV'S LLC

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

FILED
2017 AUG 18 PM 2:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on December 19, 2016 and assigned Florida document number L16000228124.

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:

JOEY NICK RISTICK

New Registered Office Address:

Enter Florida street address

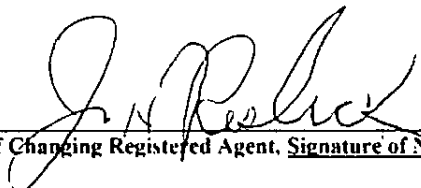
_____, Florida

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	Joey Nick Rishick	15343 MONTAUK LN CLERMONT FL 34714	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

FILED
2018 AUG 1 PM 3:45
CLERMONT FL
COUNTY CLERK'S OFFICE

2017 AUG 18
SECRETARY OF
FALLAUSSEE, F

FILED
2017 AUG 18 PM 2:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

(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)

(b) The 90th day after the record is filed.

Dated July 19, 2017

Audrey Stern

Signature of a member or authorized representative of a member

Audrey A Stevens
Typed or printed name

Typed or printed name of signee