L17000020701

(Requestor's Name)		
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Certified Copies	_ Certificates	s of Status
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T. BURCH

COVER LETTER

	Registration Sec Division of Corp		•			
		iks RV Resort, LLC				
SUBJEC	SUBJECT:Name of Limited Liability Company					
The encid	osed Articles of A	Amendment and fee(s) are sub-	nitted for filing.			
Please re	turn all correspo	ndence concerning this matter	to the following:			
		Andrew L. Reiff				
	Name of Person					
	Andrew L. Reiff, P.A.					
	Firm/Company					
	135 W Central Blvd. Suite 730					
	Address					
		Orlando, FL 32801				
			City/State and Zip Code			
		AReiff3566@aol.com	15.4.			
For furth	er information c	E-mail address: (oncerning this matter, please of	to be used for future annual report not all:	incenon)		
Andrew	L. Reiff	·	407 423-8183			
	Name o	f Person	Area Code Daytin	ne Telephone Number		
Enclosed	l is a check for th	ne following amount:				
□ \$2 5.	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)		
	Registr Divisio P.O. B	ING ADDRESS: ration Section on of Corporations ox 6327 assee, FL 32314	STREET/COUR Registration Section Division of Corportion Building Clifton Building 2661 Executive Contains and Contains Contains Contains Contains Country Coun	orations Center Circle		

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Southern Oaks RV Resort, LLC		
(<u>Name of the Limited Liabit</u> (A Florid	ity Company as it now appears on our re a Limited Liability Company)	<u>cords,</u>)
The Articles of Organization for this Limited Liability (Company were filed on January 26, 2	017 and assigned
Florida document number L17000020701	<u> </u>	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lin	ited liability company here:	
Southern Oaks RV Resort II, LLC		
The new name must be distinguishable and contain the words "Lir	nited 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 ADD	RESS)	
Enter new mailing address, if applicable:	·	F B 2
(Mailing address MAY BE A POST OFFICE BOX)		SES CONTRACTOR
(Watering Heart Ess 1977) DE 77 1 Oct Of 1 1 Con DOIN		
		<u> </u>
B. If amending the registered agent and/or regi	stered office address on our rec	ords, enter the name of the n
registered agent and/or the new registered office ad-		,
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street a	ildress
		, Florida
· .	City	Zip Costc

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

MGR = Manager

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

AMBR = Authorized Member				
<u>Title</u>	Name	<u>Address</u>	Type of Action	
			□ Remove	
			☐ Change	
			□ Add	
	,		□ Remove	
			Change	
			FILE ANASSEE	
			FILED BAC PROVED IMASSEE, F. ORIDA	
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,			D Add	
			☐ Remove	
			C) Change	
			□ Remove	
			☐ Change	
			Add	
			□ Remova	
		·	Change	

Page 3 of 3 Filing Fee: \$25.00

Typed or printed name of signee

2017

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

Andrew L. Reiff

Dated February 22