

L17000092647

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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SOUTHERN DISTRICT  
FLORIDA  
TALLAHASSEE, FL 32304

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT: MY FLORIDA VACATION 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:

CLAUDE LAMOISE FOR VLC HOLDING INVESTMENTS LLC

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

MY FLORIDA VACATION LLC

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

350 LINCOLN RD #3024

\_\_\_\_\_  
Address

MIAMI BEACH FLORIDA 33139

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

contact@myvacationinflorida.com

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

For further information concerning this matter, please call:

CLAUDE LAMOISE

305

934 6762

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/COURIER ADDRESS:**  
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

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

MY FLORIDA VACATION LLC DBA MY FLORIDA REALTY GROUP

(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 04/26/2017 and assigned  
Florida document number L17000092647.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

MY FLORIDA VACATION LLC

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)**

350 LINCOLN ROAD # 3024

MIAMI BEACH FL 33139

**Enter new mailing address, if applicable:**

**(Mailing address MAY BE A POST OFFICE BOX)**

4045 SHERIDAN AVENUE #244

MIAMI BEACH FL 33140

**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:

CLAUDE LAMOISE

New Registered Office Address:

350 LINCOLN RD #3024

Enter Florida street address

MIAMI BEACH

City

Florida 33139

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>
M	JIMMY MOROSE	350 LINCOLN RD #3024 MIAMI BEACH FL 33139	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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AUG 31 AM 8:57  
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**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 AUGUST 29, 2018

Signature of a member or authorized representative of a member

CLAUDE LAMOISE FOR VLC HOLDING INVESTMENTS LLC

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**Filing Fee: \$25.00**