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DEC 29 PH 1: 55
SECNELLARY OF STATES.
AND ARREST OF ARREST

B FIGUEROA DEC 29 2017



eric@erichaug.com
POST OFFICE BOX 12031
TALLAHASSEE, FLORIDA 32317

P: 850.583.1480 C: 850.251.2463 F: 855.825.4449

December 22, 2017

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314-6327

RE: Outdoor Escapes, LLC; Document Number: L17000146991

Enclosed please find Articles of Amendment for filing. Please return all correspondence concerning this matter to me at the above address. Please also use the above email address for future annual report notifications.

Also enclosed is check number 2435 in the amount of \$25.00 in payment of the filing fee.

Please do not hesitate to call if you have any questions and thank you in advance for your attention to this matter.

Sincerely,

Eric S. Haug

Enclosures

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Outdoor Escapes, 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 10, 2017 _ and assigned Florida document number <u>L17000146991</u> 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 "LLC." 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: New Registered Office Address: Enter Florida street address Florida

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>	Address	Type of Action
AMBR	Heather A. Salvo	2518 Lakefair Drive	
		Tallahassee, Florida 32317	Remove
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ctive date, if other than the date of filing: (or	otional)
effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days at e: If the date inserted in this block does not meet the applicable statutory filing requirements, a	fter filing.) Pursuant to 605,0
ument's effective date on the Department of State's records.	uns date will not be fisted
record specifies a delayed effective date, but not an effective time, at 12:0:	1 a.m. on the earlie
ne 90th day after the record is filed.	
November 8 (2017)	
ed A 2017	
K III	网络 首
Signature of intember or authorized representative of a member	
Ryan E. Salvo	PI BEC 2
/ / /	29
/ / / Typed or printed name of signee	
Typed or printed name of signee	

Filing Fee: \$25.00