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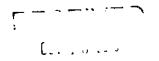
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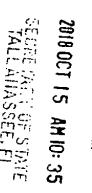


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COVER LETTER

Division of	Corporations		
	RO HOSPITALITY LLC		
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Article	s of Amendment and fee(s) are sub	omitted for filing.	
Please return all corr	espondence concerning this matter	to the following:	
	ANGUS C. ROGERS		
		Name of Person	
	MANERO HOSPITALIT	Y LLC	
		Firm/Company	····
	783 S. ORANGE AVE., S	UITE 210	
		Address	
	. SARASOTA, FL 34236		
	Angus@floridays.net	City/State and Zip Code	
	E-mail address: (to be used for future annual report notif	ication)
For further informati	on concerning this matter, please c	all:	
ANGUS C. ROGER	S	941 362-9377 at ()	
Na	me of Person	Area Code Duytime	Telephone Number
Enclosed is a check f	or 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 Tailahassee, FL 32314

TO:

Registration Section

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

FILED

MANERO HOSPITALITY LLC

2018 OCT 15 AM 10: 35

(Name of the Limited Liabi	lity Company as it now appears of	TALL AHACGES EL
(A Florid	a Elimed Clausity Company	TALLAHASSEE. FL
The Articles of Organization for this Limited Liability	Company were filed on $\frac{01/25}{}$	2018 and assigne
Florida document number L18000023115		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lin	nited liability company here:	
The new name must be distinguishable and contain the words "Lin	nited Liability Company," the desig	nation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		<u> </u>
(Principal office address MUST BE A STREET ADD	RESS)	
	•=	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
		
B. If amending the registered agent and/or registered agent and/or the new registered office add		er records, <u>enter the name of the ne</u>
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
		, Florida
	City	Zip Code
New Registered Agent's Signature, if changing Registere	ed Agent:	
I hereby accept the appointment as registered agent provisions of all statutes relative to the proper and a accept the obligations of my position as registered a being filed to merely reflect a change in the register company has been notified in writing of this change.	complete performance of my igent as provided for in Cha ed office address, I hereby c	duties, and I am familiar with and oter 605, F.S. Or, if this document is
	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 be or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Ac
MGR	NERBONNE NORTH DEVELOPMENT	783 S. ORANGE AVE., SUITE 210, SARASOTA, FL 34236	
			■ Remove
			☐ Change
MGR	ANGUS C. ROGERS	783 S. ORANGE AVE., SUITE 210, SARASOTA, FL 34236	■ Add
			Remove
			☐ Change
MGR	CHARLES P. BUTSON	3862 EAST TORCH LAKE DR. THE VILLAGES, FL 32136	≅ Add
			□ Remove
			☐ Change
			Add
			☐ Remove
			Change
			Add
			Remove
			☐ Change
· ~ · · · · · · · · · · · · · · · · · · 			Add
			☐ Remove
			Change

•	
(If an <u>No</u> t	ective date, if other than the date of filing: 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 605.020 e: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a ument's effective date on the Department of State's records.
	record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier on the 90th day after the record is filed.
ς.	OCTOBER 9 2018
Dat	Signature of a member or authorized representative of a member
	ANGUS C. ROGERS, MANAGER

Page 3 of 3

Filing Fee: \$25.00