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## . COVER LETTER

TO: Registration Se Division of Con			
	HUR'S PARK, LLC	<b>~</b> .	
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Ayleen Beltran		
		Name of Person	<del></del>
	Jeeves Florida Rentals		
	<del></del>	Firm/Company	<del></del>
	7978 Lake Wilson Rd		
		Address	
	Davenport, FL 33896		~ @
		City/State and Zip Code	7021 HAR
	Compliance@Jeevesflorida	rentals.com	
	E-mail address: (	(to be used for future annual report notification)	
For further information of	concerning this matter, please c	all:	1. E
Ayleen Beltran		407 704-8986 ext. 1010 at ( )	A 0.
Name o	of Person	Area Code Daytime Telephone Nui	mber —
Enclosed is a check for t	he following amount:		
<sup>1</sup> \$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	Certified Copy Certi (additional copy is enclosed) Certi	O Filing Fee, ificate of Status & fied Copy ional copy is enclosed)
Mailing Addre Registration		Street Address: Registration Section	
Division of C	Corporations	Division of Corporations	
P.O. Box 632		The Centre of Tallahassee	010

Tallahassee, FL 32303

### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MAC ARTHUR'S PARK, LLC		
( <u>Name of the Limited Liability Con</u> (A Florida Limit	npany as it now appears on our records.) ed Liability Company)	
The Articles of Organization for this Limited Liability Comparison document number $\frac{\text{L}18000098830}{\text{L}18000098830}$ .	nny were filed on 04/19/2018	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited li	ability company here:	
The new name must be distinguishable and contain the words "Limited Li  Enter new principal offices address, if applicable:	ability Company," the designation "LLC" or the a	abbreviation "L.L.C."
• •		<u> </u>
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable: <u>Mailing address MAY BE A POST OFFICE BOX</u> )	17420 Via Lugano Court MIROMAR LAKES, FL 33913	
		As
<ol> <li>If amending the registered agent and/or registered office and/or the new registered office address here:</li> </ol>	ce address on our records, <u>enter the nai</u>	ne of the new regist
		MAR I
Name of New Registered Agent:		. 22
New Registered Office Address:	Enter Florida street address	→ M
	Enter 1 toriut Mreet (uuress	<u>а</u> О
<del></del>	, Florida	Zip Code
	Cuy	гар Соае

#### 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 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
			Remove
			☐ Change
			□Add
			□Remove
			Change
			□Add
			Remove  AR 22  Change  Add
			Change
			□Add
			□Remove
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			DAdd
			□ Remove
			□Chana.

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	<del></del>
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	HAR T
	R <sub>2</sub>
ffective date, if other than the date of filing:	(optional)
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 603.020
lote: If the date inserted in this block does not meet the applicable statutory filing requiren	nents, this date will not be listed a
ocument's effective date on the Department of State's records.	7 3
record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earl Lis filed.	lier of: (b) The 90th day after the
r is riica.	
March 18th 2021	
March 18th 2021	
March 18th 2021	
Pated March 18th  August 2021	per
March 18th  Auto 7  Au	per

## LIMITED POWER OF ATTORNEY

know all men by these present"
INE THOMAS KATHLEEN MORRIS Macar
Hereby appoint and authorize LJ Florida Property Services DBA JEEVES HOLIDAY HOMES to act as Attorney In Fact to perform walk-thru and inspections on the property at:  50 Human St. Cussimmed Th. 34147
Legally described as LOT, 84 BLOCK: 3 WEST
and specifically Ayleen Boyce (employee of Jeeves Holiday Homes) to perform the service of activating in the owners name, discharging and overseeing accounts relating to electricity, water, sewage. HOA, telephone, cable, security, garbage collection, insurance.  Jeeves Holiday Homes will also act as Attorney in Fact in the Registration of Resort Dwelling and Occupational Licenses and for materials for repair alteration decoration replacements or any accounts relating to the premises. For properties located within the Reunion resort, and or any other community operated by a HOA, to perform all matters regarding the guest membership services on behalf of the owner. Giving and granting the said Attorney In Fact, full power and authority to do and perform all and every account and thing whatsoever required and necessary to be done in and about the premises as fully, and to all intents and purposes as the above named owner might or could do if personally present, with full power of substitution and revocation.  Also to act as my agent to rent, lease, let or grant license to others to use my described property(properties) or time share period (periods), and to charge, collect, and remit sales tax levied under chapter 212 Florida Statutes (F.S.) to the department of revenue. I acknowledge that, by renting leasing, letting, or offering a license to others to use any transient accommodation, as defined in rule 12A-1 061, Florida administrative code (F.A.C.), I am exercising a taxable privilege under chapter 212 F.S. and as such acknowledge that I am ultimately liable for any sales tax due the state of-Florida such rentals leases, lets, or licenses to use. I fully understand that should the state be unable to callect any taxes, penalties, and interest due from the rental, lease, let, or license to use my property a warrant for such uncollected amount will be issued and becomes a lien against my property and grant for such uncollected amount will be issued and becomes a lien against my property.
Sworn to and subscribed before as Kalnicon J Mercis
this
Notary/Public Commission Expires:  Stanley Zelinski State of Florida  My Commission Expires 03/08/2020  Commission Expires 03/08/2020

Commission No. FF 968978