## 118000/163349

(Re	questor's Name)	
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(Cit	ry/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Name	e)
(Do	cument Number)	
Certified Copies	_ Certificates o	of Status
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S. TALLENT

JUN 2 1 2019

## **COVER LETTER**

TO: Registration S Division of Co			
Inspire V	acation Rentals LLC		
SUBJECT:	Name of Lim	nited Liability Company	
The enclosed Articles o	f Amendment and fee(s) are sub	omitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	Andrew Phillips		
	Inspire Vacation Rentals Li	Name of Person LC	
	1511 Sweetbay Trail	Firm/Company	
	Panama City Beach, FL 32	Address 2413	<del>.</del>
	phillips andy1@gmail.com	City/State and Zip Code	
		to be used for future annual report notifi	ication)
For further information	concerning this matter, please ea	all:	
Andrew Phillips		850 819-2764	
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

inspire vacation Rentals LLC		
(Name of the Lim	ited Liability Company as it now appea (A Florida Limited Liability Company)	rs on our records.)
he Articles of Organization for this Limited L lorida document number L18000163349		1 1
nis amendment is submitted to amend the fol	lowing:	
. If amending name, enter the new name $\epsilon$	of the limited liability company h	ere:
ne new name must be distinguishable and contain the	words "Limited Liability Company." the c	designation "LLC" or the abbreviation "L.L.C."
nter new principal offices address, if appli	cable:	
Principal office address MUST BE A STREE	ET ADDRESS)	
nter new mailing address, if applicable: <u>Iailing address MAY BE A POST OFFICE</u> If amending the registered agent and egistered agent and/or the new registered of	for registered office address or	our records, enter the name of the
Name of New Registered Agent:	Patricia Phillips	
New Registered Office Address:	1511 Sweetbay Trail	
	Enter Flo.	rida street address
	Panama City Beach	, Florida <sup>32413</sup>
	City	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>	Type of Action
AMBR Pres	Andrew Phillips	1511 Sweetbay Trail, Panama City Beach FL 32413	□ Add
			<b>■</b> Remove
	Descisio Obillian	1511 Sweetbay Trail, Panama City	☐ Change
AMBR	Patricia Phillips	Beach FL 32413	Add
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			Change
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E. Effective date, if other than the d (If an effective date is listed, the date must l Note: If the date inserted in this bloc document's effective date on the Dep	be specific and cannot be prior ck does not meet the applica			
if the record specifies a delayed (b) The 90th day after the reco		t an effective time,	at 12:01 a.m. on the ear	lier of:
Dated May 24	2019	1		
Dated				
S	ignature of a member of author	rized representative of a m	ember	
Andrew Phillips	V	/		

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00