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T. MATTHEWS MAR - 4 2022

COVER LETTER

TO:

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SUBJECT	Inspire Vacat	ion Rentals, LLC	·		<i>i</i> .	*
SOBIDET:		Name of Lim	ited Liability Company			- :
Division of Corporations Inspire Vacation Rentals, 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: Andy Phillips Name of Person Inspire Vacation Rentals LLC Firm/Company 1511 Sweetbay Trail Address Panama City Beach, FL 32413 City/State and Zip Code ***ap@inspirevp.com** E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Andy Phillips **at Code** Name of Person Area Code** Name of Person Signature Telephone Number Enclosed is a check for the following amount: **Certificate of Status & Certified Copy (additional copy is enclosed) Mailling Address: Street Address:						
The enclose	Division of Corporations Inspire Vacation Rentals, LLC Name of Limited Liability Company Re enclosed Articles of Amendment and fee(s) are submitted for filing. ease return all correspondence concerning this matter to the following: Andy Phillips Name of Person Inspire Vacation Rentals LLC Firm/Company 151! Sweetbay Trail Address Panama City Beach, FL 32413 City/State and Zip Code ap@inspirevp.com E-mail address: (to be used for future annual report notification) or further information concerning this matter, please call: redy Phillips Name of Person Area Code Daytime Telephone Number Closed is a check for the following amount: U \$25.00 Filing Fee Certificate of Status Certified Copy (additional copy is enclosed)					
Please retur	m all correspon	dence concerning this matter	to the following:			
		Andy Phillips				
			Name of Person			
,		Inspire Vacation Rentals L	LC			
			Firm/Company			<u> </u>
		1511 Sweetbay Trail				
			Address	<u> </u>		
	Andy Phillips Name of Person Inspire Vacation Rentals LLC Firm/Company 1511 Sweetbay Trail Address Panama City Beach, FL 32413 City/State and Zip Code ap@inspirevp.com: E-mail address: (to be used for future annual report notification) er information concerning this matter, please call: tillips Name of Person Area Code Daytime Telephone Number It is a check for the following amount: 00 Filing Fee Certificate of Status Certificate of Status Certificate Opy (additional copy is enclosed) Certificate of Status & Certified Copy (additional copy is enclosed)					
		·	City/State and Zip Code	pany Pany		
			to be used for future annual reno	et notification		_
For further	information cor		-	ir domeadon)		
Andy Philli	ps		850 819-27	64		
	Name of I	Person		aytime Teleph	one Num	ber
Enclosed is	a check for the	following amount:				
\$25.00	Filing Fee		Certified Copy		Certifi Certifi	cate of Status & ed Copy
Re Di P.	egistration Se vision of Co O. Box 6327	rporations	Registration Division of The Centre 2415 N. Mo	n Section Corporation of Tallaha onroe Stree	ssee et, Suite	810

TO ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Inspire Vacation Rentals, LLC

22 FET 04 FET 3: 12

(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 5, 20	18 and assigned
Florida document number L18000163349		and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation	on "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	13220 Panama City Bea	ach Parkway
(Principal office address MUST BE A STREET ADDRESS)	Suite 200	
	Panama City Beach, FL	. 32407
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here: Name of New Registered Agent:	iddress on our records	enter the name of the new registered
New Registered Office Address:	Enter Florida stree	a address
		, Florida
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent:		

If Changing Registered Agent, Signature of New Registered Agent

a amenang Aumoraeu i erson(s) aumoraeu io manage, enter the tine, 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	Ricky Ingram	13220 Panama Beach Parkway, Suite 220	= Add
		Panama City Beach, FL 32407	□Remove
			Change
	<u></u>		□Add
			□Remove
			Change
			□Add
			ПRетоve
			□ Change
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an effective da lote: If the d	te, if other than the date of filing:	uant to 605.0207 tot be listed as
record specif I is filed.	fics a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th	n day after the
ated <u>2</u>	121/2022	
	Signature of a member or authorized representative of a member	
	Patricia Phillips	