118000216178

(Requestor's Name)
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Business Entry Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



200329934772

2019 MAY 24 AM 9: 34

APPROVEU AND FILED

05/24/19--01014--009 **25.00

TALLAHASSEE, FLORIDADD

T GLASS

COVER LETTER

Division of Co	orporations				
SUBJECT:	lacation Bira	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:			
	Frank f	Name of Person Long UA Firm/Company		-	
	Frank F	long upa			
	3116 Co	pital Cir NE		2019 HAY 24	
	Tallaha	Well, FL 32308 City/State and Zip Code Very good cpa, co to be used for Mure annual report notifi			
	-tranka	very good cpa.	om	AH 9: 34	
For further information	concerning this matter, please c		neation)		
Frank	Kong of Person	at (<u>\$50</u>) 668 4	935 e Telephone Number		
Control in a short for	d. c n	ŕ	·		
Enclosed is a check for	· ·				
\$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	te of Status &	
	LING ADDRESS: tration Section	STREET/COURI Registration Sectio			

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

Registration Section

TO:

Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

Sinian Capital L	LC
(Name of the Limited Liability Company as i (A Florida Limited Liability	t now appears on our records.) y Company)
The Articles of Organization for this Limited Liability Company were Florida document number <u>L18000216178</u> .	filed on 9/11/2018 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability of Vacation Bird LLC	ompany here:
The new name must be distinguishable and contain the words "Limited Liability Cor	npany," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
	2019
	ZA ZAM
Enter new mailing address, if applicable:	24 PAP
(Mailing address MAY BE A POST OFFICE BOX)	
	<u> </u>
	ည
B. If amending the registered agent and/or registered office a registered agent and/or the new registered office address here:	iddress on our records, enter the name of the n
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
·	Florida
	ity 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 th 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
			
			□ Remove
			□ Remove
			☐ Change
			Add
			APPROVE APPROVED APPROVE APPROVED APPROVE APPROVED AND Add Add Add Add Add Add
			## 9E34
			☐ Remove
			Change
			Add
			Remove
			Change
			□ Remove
			Change

			· - -				<u>,</u>		
						 .			
_									
	-				 .				
					· ·				
				··			-	_	
			-					•	_
			_		-				
							<u>-</u>	2019	
					-		:- =	HA	
			<u> </u>			<u> </u>		2	<u> </u>
_		_	<u>.</u>	·			-5.1	- T	
							- , , ,	3	, ,
								<u> </u>	— c
							•	34	
				*					
	·								_
an effective date is ote: If the date	Tother than the d listed, the date must be inserted in this bloc ive date on the Dep	e specific and c k does not me	cannot be prior	to date of filing able statutory i	or more than 90 Iling requirem	(optio days after the	iling.) Pı	irsuant to	605.02 listed :
	ifies a delayed (effective da d is filed.	ate, but not	an effectiv	re time, at :	12:01 a	.m. on	the ea	rlier (
e record spec The 90th day	after the recor								
The 90th day	after the recor		2019	·					
The 90th day	y after the record	Mei gnature of a mo	2019	rized representa	tive of a membe	er			

Page 3 of 3

Filing Fee: \$25.00