## L18000275221

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## **COVER LETTER**

| ision of Cor   | porations  |  |  |
|----------------|--|--|--|
| National Ti    | meshare Broker, LLC  |  |  |
|                | Name of Lim  | ited Liability Company   |  |
|                |  | in te en.  |  |
| 1 Articles of  | Amendment and fee(s) are sub   | mitted for filing.   |  |
| all correspo   | ndence concerning this matter  | to the following:  | ار در این از در این<br>در در این از در این   |
|                | Jennifer Hardy   |  | THE THE PARTY OF T |
|                |  | Name of Person   |  |
|                | National Timeshare Broke   | r, LLC   |  |
|                |  | Firm/Company   |  |
|                | 7643 Gate Parkway Suite  | 104-672  |  |
|                | Jacksonville, FL 32256   | Address  |  |
|                | jennifer@ntsbroker.com   | City/State and Zip Code  |  |
|                | E-mail address: (  | to be used for future annual report noti-  | fication)  |
| nformation c   | oncerning this matter, please ca   | all:   |  |
| dy             |  | 561 354-8800   |  |
| Name o         | f Person   | Area Code Daytime  | e Telephone Number   |
| a check for th | e following amount:  |  |  |
| Piting 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)   |
|                | National Tild Articles of all corresponding all corresponding to the articles of all corresponding to the articles of the arti | Articles of Amendment and fee(s) are sub all correspondence concerning this matter  Jennifer Hardy  National Timeshare Broke  7643 Gate Parkway Suite  Jacksonville, FL 32256  jennifer@ntsbroker.com  E-mail address: ( Information concerning this matter, please concerning this matter)  Rame of Person  a check for the following amount:  Filing Fee  \$30.00 Filing Fee & | National Timeshare Broker, LLC  Name of Limited Liability Company  d Articles of Amendment and fee(s) are submitted for filing.  n all correspondence concerning this matter to the following:  Jennifer Hardy  Name of Person  National Timeshare Broker, LLC  Firm/Company  7643 Gate Parkway Suite 104-672  Address  Jacksonville, FL 32256  City/State and Zip Code  jennifer@ntsbroker.com  E-mail address: (to be used for future annual report notinformation concerning this matter, please call:  rdy  Name of Person  Name of Person  Total Code  Daytime  a check for the following amount:  Filing Fee  S55.00 Filing Fee & Certified Copy   |

MAILING ADDRESS:

TO:

**Registration Section** 

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**

| ARTICL  | ES OF AMENDMENT   |
|---|---|
|   | TO  |
| ARTICLE   | S OF ORGANIZATION   |
|   | OF F  |
| National Timeshare Broker, LLC  |   |
| ( <u>Name of the Limited Liabi</u><br>(A Florid   | TO S OF ORGANIZATION OF  lity Company as it now appears on our records.) da Limited Liability Company)  Company were filed on November 28, 2018 and assigned  |
| The Articles of Organization for this Limited Liability   | Company were filed on November 28, 2018 and assigned  |
| Florida document number L18000275221  |   |
| This amendment is submitted to amend the following:   |   |
| A. If amending name, enter the new name of the lin  | nited liability company here:   |
| National Property Broker, LLC   |   |
| The new name must be distinguishable and contain the words "Li  | imited Liability Company," the designation "LLC" or the abbreviation "L.L.C."   |
| Enter new principal offices address, if applicable:   |   |
| (Principal office address MUST BE A STREET ADD  | PRESS)  |
| B. If amending the registered agent and/or registered agent and/or the new registered office ad             | istered office address on our records, enter the name of the new<br>dress here:   |
| Name of New Registered Agent:   |   |
| New Registered Office Address:  |   |
| nen magnitud Office Address.  | Enter Florida street address  |
|   | Florida   |
| <del></del>   | City Zip Code   |
| New Registered Agent's Signature, if changing Register  | ed Agent:   |
| provisions of all statutes relative to the proper and accept the obligations of my position as registered c | t and agree to act in this capacity. I further agree to comply with the complete performance of my duties, and I am familiar with and agent as provided for in Chapter 605, F.S. Or, if this document is red office address. I hereby confirm that the limited liability? |
|   |   |

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 |
|--------------|-------------|-------------|----------------|
|              |             |             | Add            |
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| Feetive date, if other than the date of filing:  n 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 60 day. If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be list current'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 earlifthe 90th day after the record is filed. |   |   |                             |                                |        |
|---|---|---|-----------------------------|--------------------------------|--------|
| record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earliche 90th day after the record is filed.   |   |   |                             | <u>.</u>                       |        |
| neffective 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 60:  te: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be list cument'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 earlithe 90th day after the record is filed.  |   |   |                             |                                |        |
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| he 90th day after the record is filed.  | effective date is listed, the date must be spec<br>e: If the date inserted in this block does | ific and cannot be prior to do<br>s not meet the applicable | te of filing or more than 9 | 0 days after filing.) Pursuant |        |
| March 7 2019  |   |   | effective time, at          | 12:01 a.m. on the $\epsilon$   | arlier |
|   | ed March 7  | 2019  |                             |                                |        |
|   |   |   |                             |                                |        |
| Junith Harty Signature of a member or authorized representative of a member   | MARIEN HOLAY  | a of a mombor or authorize                                  | I representative of a mem   | her .                          | _      |

Page 3 of 3

Filing Fee: \$25.00