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CRC

COVER LETTER

TO:	Registration Sectorial Division of Corp			
eun II		ARK HISTORIC HOTELS GR	ROUP, LLC	for filing. following: Name of Person Firm/Company
SUBJE	.C1:	Name of Limi	ted Liability Company	
The end	closed Articles of A	mendment and fee(s) are subr	nitted for filing.	
Please i	return all correspon	dence concerning this matter t	o the following:	
		NANCY A ROSSMAN		
			Name of Person	
		 	Firm/Company	
		3200 S. HIAWASSEE RD.	, STE 205	
			Address	
		ORLANDO, FL 32835		
		NAROSSMAN@NAROSS	City/State and Zip Code MAN.COM	
		E-mail address: (t	o be used for future annual report noti	fication)
For furt	ther information co	ncerning this matter, please ca	II:	
NANC	Y A ROSSMAN		407 523-2323X1	
	Name of	Person	Area Code Daytim	e Telephone Number
Enclose	ed-is a check for the	following amount:		
\$25	5.00 Filing Fcc	□ \$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

WINTER PARK HISTORIC HOTELS GROUP, LLC

(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 MAY 07, 2019 and assigned Florida document number L19000123972 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited 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 ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

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.

City

If Changing Registered Agent, Signature of New Registered Agent

, Florida _

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
MGR	NANCY A ROSSMAN	3200 S HIAWASSEE RD STE205 ORLANDO, FL 32835	
			Remove
			Change
MGR	LUKE WICKHAM	1760 ELIZABETHS WALK WINTER PARK, FL 32789	
			Remove
			☐ Change
MGR	ERIC HOLM	1069 W. MORSE BLVD. WINTER PARK, FL 32789	
			Remove
			□ Change
			Add
			☐ Remove
			Change
			
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	ord specifies a d 90th day after t			an effective time	e, at 12:01 a.m. on	the earlier of
Dated _	06/27	1	2019	·		
	\emptyset	00		rized representative of a		

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00