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(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
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(Bu	siness Entity Name	e)
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Certified Copies	Certificates of	of Status
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Special Instructions to	Filing Officer:	
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Office Use Only



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Y. SCOTT JUN 1 8 2023

COVER LETTER

TO:

Registration Section

Division of Cor	porations						
Destin Ther SUBJECT:	ne Vacation Rentals LLC						
ı [,]	Name of Lim	ited Liability Com	ıpany				
The enclosed Articles of	Amendment and fcc(s) are sub	mitted for filing					
Please return all correspo	ndence concerning this matter	to the following	:				
	Jeffrey Stephens						
		Name of P	erson				
	Northwest Resistered Ager	nt LLC					
		Firm/Com	pany			2023	
	7901 4Th St N Ste 300				· · · · · · · · · · · · · · · · · · ·	2023 HAY -	
		Addres	ss		 ;	1	·
	St. Petersburg, FL 33702				, TA	1 PM 2: 18	1
		City/State and	Zip Code		712	2: -	
	ines8101@gmail.com				. i	œ	
		to be used for futt	ire annual re	port notification	,		
For further information c	oncerning this matter, please co	all:					
Ines Stephens		404 at (8098)	101			
Name o	f Person	Area (Code	Daytime Telepl	hone Number		
Enclosed is a check for the	ne following amount:						
■ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	S55.00 Fi Certified (additional			S60.00 Filing Certificate of Certified Col (additional copy	f Status & py	
Mailing Address Registration S Division of O P.O. Box 632 Tallahassee, I	Section Corporations 17		Division The Cent 2415 N.	ion Section of Corporati tre of Tallaha	assee et, Suite 810		

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Destin Theme Vacation Rentals LLC			
(<u>Name of the Limited Liability Com</u> (A Florida Limite	ipany as it now appears on our records. d Liability Company))	
The Articles of Organization for this Limited Liability Compa	ny were filed on 08/15/2019		and assigned
Florida document number L19000208339			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited li	ability company here:		
Global Theme Vacation Rentals LLC			
The new name must be distinguishable and contain the words "Limited Li	ability Company," the designation "LLC"	or the ab	previation "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)			
Enter new mailing address, if applicable:			202
		·	F. TI
(Mailing address MAY BE A POST OFFICE BOX)		;	erange
		-;	<u> </u>
B. If amending the registered agent and/or registered offic	e address on our records, enter t	he <u>nam</u>	e of the new register
agent and/or the new registered office address here:		그런	
	•	i) i	c
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street address		
	. Flor	rida	
	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 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
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ective date, if other than the effective date is listed, the date must e: If the date inserted in this blument's effective date on the De	t be specific and cannot be prock does not meet the app	ior to date of filing or licable statutory fil	(option of the contract of the	filing.) Pu	irsuant to 605.02 I not be listed
cord specifies a delayed effective s filed.	e date, but not an effectiv	e time, at 12:01 a.m	on the earlier of: (b) The 9	0th day after th
ed April 28	2023	A.			
_/					.
	Signature of a member or at	the amount managements.	to of a miombar		