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D CUSHING

COVER LETTER

ection rporations		
TIONS IN PARADISE, LLC		
Name of Lim	ited Liability Company	
f Amendment and fee(s) are sub	mitted for filing.	
ondence concerning this matter	to the following:	
PETRUSKA, JAMES J		
	Name of Person	
DESTINATIONS IN PAR	RADISE, LLC	
	Firm/Company	
2234 SW 51ST ST		
<u> </u>	Address	
CAPE CORAL, FL 3391	4	20 HAR
	City/State and Zip Code	
jim@dipvacations.com		9
E-mail address: (to be used for future annual report no	otification)
concerning this matter, please co	all:	iš
		2.8
of Person		me Telephone Number
the following amount:		
S30.00 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)
Section Corporations	Division of C	orporations
	TIONS IN PARADISE, LLC Name of Lim f Amendment and fee(s) are subsondence concerning this matter PETRUSKA, JAMES J DESTINATIONS IN PARADISE CORPE CORAL, FL 3391 jim@dipvacations.com E-mail address: (concerning this matter, please concerning this matter, please concerning this matter) of Person	ATIONS IN PARADISE, LLC Name of Limited Liability Company f Amendment and fee(s) are submitted for filing, condence concerning this matter to the following: PETRUSKA, JAMES J Name of Person DESTINATIONS IN PARADISE, LLC Firm/Company 2234 SW 51ST ST Address CAPE CORAL, FL 33914 City/State and Zip Code jim@dipvacations.com E-mail address: (to be used for future annual report not concerning this matter, please call: 239 898-9747 of Person Area Code Dayti the following amount: \$330.00 Filing Fee & Certified Copy (additional copy is enclosed) **SSE: Section Corporations Street Address: Registration S Division of Corporations Division of Corporations

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

DESTINATIONS IN PARADISE, LLC

The Articles of Organization for this Limited Liability		and assigned
Florida document number L20000025109	,	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lin	mited liability company here:	
The new name must be distinguishable and contain the words "Li	imited Liability Company," the designa	tion "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADD	ORESS)	
		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or register agent and/or the new registered office address here:		ls, enter the name of the new registered
Name of New Registered Agent:	10	
New Registered Office Address:		
	Enter Florida str	eet address
	-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1	, Florida
	Ciţy	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 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
MGR	Christopher J Hearn	5781 Cape Harbour Dr [*] ≤ O 'S	
		Cape Coral, FL, 33914	□Remove
			□Change
			□ Remove
			□ Change
			□ Add
			Remove
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			□ Change

ffective date, if other than the date of filing: an 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 605 0207 folge: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as occument'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 earlier of: (b) The 90th day after the 1 is filed. Signature of 5 incapher or authorized representative of a member James J Petruska		nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
Flective date, if other than the date of filing:	_	
ffective date, if other than the date of filing:		
Fective date, if other than the date of filing:	_	
Tective date, if other than the date of filing: In effective date, if other than the date of filing: In 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 605.0207 In the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as becoment's effective date on the Department of State's records The specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the is filed. Signature of Sheuber or authorized representative of a member	_	
Fective date, if other than the date of filing: (optional) meffective 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 605.0207 other. If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as becoment'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 earlier of: (b) The 90th day after the is filed. Signature of Sheuber or authorized representative of a member		
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Signature of a member or authorized representative of a member		
	ited _	February 23 2020
James J Petruska		Signature of a number or authorized representative of a member
		James J Petruska

Filing Fee: \$25.00