# L20 000 144 618

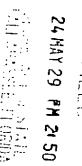
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



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## **COVER LETTER**

Division of Corp	porations		
SUBJECT:	Stay and P Name of Limi	lay Tows, L	LC
The enclosed Articles of A	Amendment and fec(s) are sub	nitted for filing.	
Please return all correspon	ndence concerning this matter	to the following:	
	Kenn	1 H Destric K Name of Person	
	Stay and	Play Tours,	LLC
	1460 SE 13	5th Street Ur Address (	nitB
	Fort Laude hellow tiki-	City/State and Zip Code  Time party bock to be used for future annual report	33316 ts. com notification)
For further information co	oncerning this matter, please ca	all:	
	Deitrick Person	at ( <u>954</u> ) <u>(</u> ) Area Code Da	(0 9-8122 ytime Telephone Number
Enclosed is a check for th	e following amount:		
2 S25.00 Filing Fee	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)
)			

TO: Registration Section

Mailing Address:
Registration Section
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Stay and Play To (Name of the Limited Liability Compan (A Florida Limited Li	y as it now appears on our records.)
The Articles of Organization for this Limited Liability Company violated document number <u>L 200 00 144618</u> .	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabil	lity company here:
NIA	
The new name must be distinguishable and contain the words "Limited Liabilis	
Enter new principal offices address, if applicable:	1460 SE 15th Street Unit B
(Principal office address MUST BE A STREET ADDRESS)	Fort Lauderclale, F.L = 33/6
Enter new mailing address, if applicable: ( <u>Mailing address MAY BE A POST OFFICE BOX)</u>	29 PM 24 50
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	
Name of New Registered Agent: Ker.  New Registered Office Address: 1440 St.	EISTHSTYLLT UNITB
Fort La	City, Florida 33316 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. Thereby 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>	Name	Address	Type of Action
fres	Frank Soska	1460 SE 15th Street, U	7i+Badd
		Fort Lauderdale, FL 33	3/ Remove
			□Change
Pres	Kenneth Deitrick	1460 SE 15th Street Un	HBOMAdd
		Fort Lauderdole, FL 3331	∠ □ Remove
			□Change
			🗆 Add
			□Remove
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<u>lote:</u> If	e date, if other than the date of filing: May 20, 2024 (optional) tive 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 605.02 the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed at '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
ated	May 20 . 2024.
	Signature of a member or authorized representative of a member
	• • • • • • • • • • • • • • • • • • • •