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COVER LETTER

Division of Cor			>		
Timeshare	Wealth Li.C				
SUBJECT:		ited Liability Company			
		,			
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return all correspo	ondence concerning this matter	to the following:			
	Michael Kirshtein				
		Name of Person	·		-
	Timeshare Wealth LLC				
		Firm/Company		~	-
	1500 Beville Road, Suite 6	606-230			
		Address			-
	Daytona Beach, FL 32114				
		City/State and Zip Code	-		-
	mikekirshtein@timesharew	ealth.com to be used for future annual r			2021 S. 1
the attended to the account on the			eport manicali	1117	(T) (B)
For further information c	oncerning this matter, please c	au:			-
Michael Kirshtein		at ()	I-8915		
Name o	f Person	Area Code	Daytime Tel	ephone Numbe	2021 OCT -4 FM 58 11 STATE / SASS SASS
Enclosed is a check for the	ne following amount:				•••
■ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55,00 Filing Fee & Certified Copy radditional copy is encl		Certified	ate of Status &
<u>Mailing Addres</u> Registration S	is: Section	<u>Street Ad</u> Registra	ldress: ition Section	n	
Division of C			i of Corpora		

P.O. Box 6327 Tallahassee, FL 32314 The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Timeshare Wealth LLC					
(Name of the Limited	I Liability Company as A Florida Limited Liabilit	t now appears on our reco y Company)	<u>rds.</u>)		
The Articles of Organization for this Limited Lia		filed on 09/21/2020		and assig	gned
This amendment is submitted to amend the follow	ving:				
A. If amending name, enter the new name of t	the limited liability o	ompany here:			
The new name must be distinguishable and contain the wor	rds "Limited Liability Co	mpany," the designation "Ll	.C" or the abb	reviation "L.L.	C."
Enter new principal offices address, if applical	ble:				
Principal office address MUST BE A STREET	`ADDRESS)				
Enter new mailing address, if applicable:					<u>.</u>
Mailing address MAY BE A POST OFFICE B	<u> </u>				
B. If amending the registered agent and/or requestions and/or the new registered office address		ss on our records, <u>ente</u>	r the name	of the new	registered
Name of New Registered Agent:					
New Registered Office Address:				202	
		Enter Florida street addr	ess) () ()	
			lorida	*Zip Code	و - <u>سر</u>
None Designated Association Communication Designation		<i>ity</i>		•	7
New Registered Agent's Signature, if changing Re	-		_	ברד ביי אי	
I hereby accept the appointment as registered provisions of all statutes relative to the proper accept the obligations of my position as regist being filed to merely reflect a change in the recompany has been notified in writing of this company when the company has been notified in writing of this company when the company has been notified in writing of the company when the company when the company we will be a company when the company whence where whence where whence where whence where whence where wh	r and complete perforered agent as provide gistered office addr	ormance of my duties, led for in Chapter 605	and Lam fo , F.S. Or, i	miliar v <u>eit</u> h f this docun	and ient is
	If Changing I	Registered Agent, Signature	of New Regi	stered 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>	<u>Address</u>	Type of Action
AMBR	Jennavessiah Coletti	809 Cook Street, Apt. 1	□ Add
		Daytona Beach, FL 32114	■Remove
			Change
			□Add
			□Remove
			Change
		_	□Add
			Change C
			□Add □
			□Add
			□Remove
			Change
			\ \ \ _Add
			□Remove
			□ Change

oes not meet the applicable statutory filing requirements, this date will not be listed
of filing: 09/30/2021 (optional)
of filing:
of filing: 09/30/2021 (optional)
of filing: 09/30/2021 (optional) secific and cannot be prior to date of tiling or more than 90 days after tiling.) Pursuant to 605.0, oses not meet the applicable statutory filing requirements, this date will not be listed
of filing:
of filing:
of filing:
of filing:
oes not meet the applicable statutory filing requirements, this date will not be listed
nent of State's records.
but not an effective time, at 12:01 a.m. on the earlier of: (b). The 90th day after t
2021

Filing Fee: \$25.00