

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ldress)	
(Cit	ty/State/Zip/Phone #)	
PICK-UP	MAIT	MAIL
(Bu	siness Entity Name)	
(Do	cument Number)	-
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COVER LETTER

TO:	Registration Section Division of Corporations
SUBJE	CT: AIRBUBEARS VACATION RENTALS, UC
	Name of Limited Liability Company
The enc	losed Articles of Amendment and fee(s) are submitted for filing.
Please re	eturn all correspondence concerning this matter to the following:
	JUAN C. MAUDONADO DONOSO Name of Person
	AIRBNBEARS VACATION RENTALS Firm/Company
	1737 NE Z6th Drive
	WILTON MANORS, FL 33334 City/State and Zip Code team @ managelauderdale.com E-mail address: (to be used for future annual report notification)
for furthe	er information concerning this matter, please call:
Ju	Name of Person at (407) 456-3351 Area Code Daytime Telephone Number
inclosed i	is a check for the following amount:
□ \$25,00	O Filing Fee Sano Filing Fee Certificate of Status Certificate of Status Certificate of Status Certificate of Status Certified Copy (additional copy is enclosed) S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
R D P	lailing Address: egistration Section livision of Corporations O. Box 6327 allahassee, 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

(Name of the Limited Liability Compa (A Florida Limited I	ON FENIALS	our regards)	
(A Florida Limited I	Liability Company)	our records.	
The Articles of Organization for this Limited Liability Company Florida document number <u>L21000054929</u> .	were filed on 02	101/2021	_ and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	ility company here:		
MANAGE LAUDERDALF VACATIO	ON RENTALS	s, LLC	
MANAGE LAUDER DALE VACATION The new name must be distinguishable and contain the words "Limited Liabiletical Contains the words "Limited Liabiletical Contains the words".	lity Company," the designa	ation "LLC" or the abbre	eviation "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)		۸:	~
		超	2 A GIN 120
		(= i=	VOV
Enter new mailing address, if applicable:			26
•		IAS SE	2 III
(Mailing address MAY BE A POST OFFICE BOX)	 	19 m	F U
			-25
B. If amending the registered agent and/or registered office :	address on our recor	ds enter the name	of the new registe
agent and/or the new registered office address here:	address on our record	us, enter the name	or the new registe
Name of New Registered Agent:			
New Registered Office Address:			
Now Registered Office Plade 655.	Enter Florida si	reet address	
		, Florida	
	City		Zip Code
New Registered Agent's Signature, if changing Registered Agent:	<u>.</u>		
I hereby accept the appointment as registered agent and agr	ree to act in this capa	icity. I further agre	e to comply with
provisions of all statutes relative to the proper and complete	performance of my	duties, and I am fai	niliar 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 = M $AMBR = A$	lanager authorized Member		
<u>Title</u>	Name	Address	Type of Action
			□ Λđd
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□ Change
			DAdd
			□Remove
		 	□Change
			□Add
			□Remove
			□Change
			□ Add
			□Remove

______ Change

	ling any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	
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(If an effect Note: If	tive date, if other than the date of filing:
the record scord is	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 l.
Dated _	NOVEMBER 13, 2024. Signature of a member of authorized representative of a member
	JUAN C. MALDONADO DONOSO Typed or printed name of signee

. . . .