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PICK-UP WAIT MAIL
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(Document Number)
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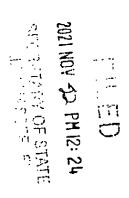
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A. RIVERS



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November 9, 2021

BARBARA DE LA ROSA 1125 AUDACE AVE 406 BOYNTON BEACH, FL 33426

SUBJECT: FLO RIDEZ LLC Ref. Number: L21000107413

We have received your document for FLO RIDEZ LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 321A00027268

Alecia Rivers Regulatory Specialist II

www.sunbiz.org

COVER LETTER

 $\mathbf{w} = \{\mathbf{v}_{i}, \mathbf{v}_{i}, \mathbf{v}_{i}, \dots, \mathbf{v}_{i}\}$

TO: Registration Section Division of Corporat	ions			
Flo Ric	dez LLC			
SUBJECT:		ed Liability Company		
The enclosed Articles of Amen	idment and fee(s) are subm	nitted for filing.		
Please return all correspondence	e concerning this matter to	the following:		
E	Barbara De	e La Ro	sa	
		Name of Person		
		Firm/Company		
	l 125 Auda	ice Ave	406	
_		Address		
<u> </u>	Boynton B			<u> </u>
ir	ofo@flovacatio	City/State and Zip Conrentals.C be used for future ann	com	on)
For further information concern			,	
Barbara De	La Rosa	_{at} 561	570-53	390
Name of Perso	on	Area Code		phone Number
Enclosed is a check for the foll	owing amount:			
	\$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing F Certified Copy (additional copy is	,	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address:			t Address:	
Registration Section Division of Corpo			stration Section sion of Corpora	
P.O. Box 6327			Centre of Tallal	
Tallahassee, FL 32	2314		N. Monroe Strahassee, FL 323	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Lia (A Flo	ability Company as it now appears on our records.) orida Limited Liability Company)	
The Articles of Organization for this Limited Liabilit	ry Company were filed on 03/05/21	and assigned
This amendment is submitted to amend the following	ž;	
A. If amending name, enter the new name of the	limited liability company here:	
Flo Vacation Rentals LLC		
The new name must be distinguishable and contain the words "	Limited Liability Company," the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address M <u>UST</u> BE A <u>STREET</u> A <u>D</u>	ODRESS)	
Enter new mailing address, if applicable: "Mailing address MAY BE A POST OFFICE BOX,"	2	
		
B. If amending the registered agent and/or registongent and/or the new registered office address her		-
Name of New Registered Agent:		DANA CL
New Registered Office Address:		77 Z
	Enter Florida street address	M
_	, Florid	laZıp Code
	Cùy	Zip Code

New Registered Agent's Signature, if changing Registered Agent:

Flo Ridez II C

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>	Name	Address	Type of Action
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			🗀 Add
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