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## **COVER LETTER**

	tration Se on of Cor	ection -porations			
SUBJECT:	Aspen Gro	ve Vacations LLC			
SUBJECT: _		Name of Lim	ited Liability Company		
The enclosed A	Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return al	II correspo	ondence concerning this matter	to the following:		
		Stephanie Goebel			
			Name of Person		28
		ZenBusiness Inc.		- E035	<b>20</b> 22 DEC
			Firm/Company		29
		5511 Parkerest Drive, Ste.	103	स्थान स्थान स्थान	7
			Address	= · · · · · · · · · · · · · · · · · · ·	رتن
		Austin, TX 78731		, naba	9. 3.
		fulfillment@zenbusiness.cc	City/State and Zip Code		
			to be used for future annual report notif	fication)	
For further info	rmation c	oncerning this matter, please c	all:		
Stephanie Goe	bel c/o Ze	nBusiness Inc.	844 493-6249 at ( )		
	Name o	f Person		e Telephone Number	_
Enclosed is a c	heck for th	ne following amount:			
■ \$25.00 Fili		□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing For Certificate of Standard Copy (additional copy is	Status &
	Registr Divisio P.O. Be	ING ADDRESS: ration Section on of Corporations ox 6327 assee, FL 32314	STREET/COURI Registration Section Division of Corpor Clifton Building 2661 Executive Ce	en rations	

Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Aspen Grove Vacations LLC				
( <u>Name of the Limited Liability Compa</u> (A Florida Limited	inv as it now appears on our records.) Liability Company)			
The Articles of Organization for this Limited Liability Company Florida document number 1.22000154857	were filed on <u>03/30/2022</u>		and as	signed
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liab	nility company here:			
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the	ne abbrevi		.L.C."
Enter new principal offices address, if applicable:		<u> </u>	<b>2</b> 02]	
(Principal office address MUST BE A STREET ADDRESS)		<u>≥</u> 2,	DEC :	
		7	C 2	
		771 771	<del>- 6</del>	:
Enter new mailing address, if applicable:	6690 Water Street Navarre, FL 3256		PH	[]]
•		3	<del>.ప</del>	<del></del>
(Mailing address MAY BE A POST OFFICE BOX)		<u>⊕</u>	90	
B. If amending the registered agent and/or registered of	ffice address on our records, en	ter the	name	of the ne
registered agent and/or the new registered office address her				
Name of New Registered Agent:				
New Registered Office Address:				
	Enter Florida street address			
·	, Florida			
	t'ity	7	lin Cooks	

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
AMBR	Jordan Parran		
		<del></del>	
			□ Remove
		6690 Water Street Navarre, FL 32566	🖃 Change
AMBR	Uriah Thomas Parran		
		830 Christy Court Pensacola, FL 32508	Remove
			Change
			Add
		<del></del>	□ Remove
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ed December 9	. 202	2 .					
/s/ Jordan Parran							

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00