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## DocuSign Envelope ID: 6C4F82E0-1D5C-4719-B238-DF6880F97E02 COVER LETTER TO: Registration Section **Division of Corporations** ARY Stays LLC SUBJECT: \_ Name of Limited Liability Company The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Yelixza Rodriguez Name of Person ARY Stays LLC Firm/Company 6331 Glory Bower Dr Address Winter Garden, FL 34787 City/State and Zip Code Arystays@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: 797.9902 Rebecca Diaz Daytime Telephone Number Name of Person Enclosed is a check for the following amount: ☑ \$25.00 Filing Fee □ \$30,00 Filing Fee & ☐ \$55.00 Filing Fee & □ \$60.00 Filing Fee. Certificate of Status Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed) (additional copy is enclosed) Mailing Address: Street Address: Registration Section Registration Section Division of Corporations Division of Corporations P.O. Box 6327 The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

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## TO ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

2022 MAY 25 PM 1: 19

| ARY Stays LLC  |   | CONTRACTOR STREET                            |  |  |
|--|---|--|--|--|
| ( <u>Name of the Limited Liability</u><br>(A Florida I   | Company as it now appears on our<br>imited Liability Company) | records.) SECHETARY OF STATE TALLAHASSEE. FL |  |  |
| The Articles of Organization for this Limited Liability Co   | mpany were filed on04/11/20                                   | and assigned                                 |  |  |
| Florida document number L22000172453   | _•  |  |  |  |
| This amendment is submitted to amend the following:  |   |  |  |  |
| A. If amending name, enter the new name of the limit   | ed liability company here:                                    |  |  |  |
| The new name must be distinguishable and contain the words "Limite   | ed Liability Company," the designatio                         | n "LLC" or the abbreviation "L.L.C."         |  |  |
| Enter new principal offices address, if applicable:  |   |  |  |  |
| (Principal office address MUST BE A STREET ADDRI   | <u> </u>  |  |  |  |
| Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)                      |   |  |  |  |
| B. If amending the registered agent and/or registered agent and/or the new registered office address here: | office address on our records,                                | enter the name of the new registere          |  |  |
| Name of New Registered Agent:  |   |  |  |  |
| New Registered Office Address:   |   |  |  |  |
|  | Enter Florida street address                                  |  |  |  |
|  |   | , Florida                                    |  |  |
|  | Cuv   | 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. I hereby confirm that the limited liability company has been notified in writing of this change.

DocuSign Envelope ID: 6C4FB2E0-1D5C-4719-B238-DF6880F97E02 Transcring Authorized rerson(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 |
|--------------|-------------------|---------------------------------------|----------------|
| MGR          | Yelixza Rodriguez | 6331 Glory Bower Dr Winter Garden, Fl | . 34787<br>    |
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| ffectiv             | date, if other than the date of filing:   | ational)              |                 |       |
| an elle             | we date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days a the date inserted in this block does not meet the applicable statutory filing requirements. | fter filing.) Pursuai |                 |       |
|                     | 's effective date on the Department of State's records.   | this date with no     | . De liste      | u as  |
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| record<br>d is file | pecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of .   | : (b) The 90th c      | lay after       | the   |
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Filing Fee: \$25.00