L22002178000

| (Decureted Nema) |
|---|
| (Requestor's Name) |
| |
| (Address) |
| |
| (Address) |
| ((101050) |
| |
| (City/State/Zip/Phone #) |
| |
| |
| |
| |
| (Business Entity Name) |
| |
| (Document Number) |
| |
| Certified Copies Certificates of Status |
| |
| |
| Special Instructions to Filing Officer: |
| |
| |
| |
| |
| |
| |
| |
| |
| |
| Office Use Only |
| |
| |
| |



06/09/22--01017--010 **25.00

RECEIVED FILL JUN-9 PHI2: 35

CC ~ 10/9/2022

COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: BIG DEAL REALTY AND VACATION RENTALS, LLC

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:



For further information concerning this matter, please call:

Fany BAKER at (<u>850</u>) <u>628- (</u>

Enclosed is a check for the following amount:

¥ \$25.00 Filing Fee

□ \$30.00 Filing Fee & Certificate of Status

\$55.00 Filing Fee & Certified Copy (additional copy is enclosed) \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

<u>Mailing Address:</u> Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303 ...

| ARTICLES OF A T(ARTICLES OF O OI |) RGANIZATION | |
|---|--|--------------------------|
| BIG DEAL REALTY And Vace (Name of the Limited Liability Compan (A Florida Limited L | tion Rentals, LLCO iv as it now appears on our records.) iability Company) | 22 JUN -9 PH 12: 35 |
| The Articles of Organization for this Limited Liability Company Florida document number <u>L220002[7806</u> | were filed on MAY 6, 205 | 22 and assigned |
| This amendment is submitted to amend the following: | | |
| A. If amending name, <u>enter the new name of the limited liabil</u> $\frac{N/A}{}$ The new name must be distinguishable and contain the words "Limited Liabili | | ubbreviation "L.L.C." |
| Enter new principal offices address, if applicable: | N/A | |
| (Principal office address MUST BE A STREET ADDRESS) | | · |
| Enter new mailing address, if applicable: | N/A | |
| <u>(Mailing address MAY BE A POST OFFICE BOX)</u> | | |
| B. If amending the registered agent and/or registered office a <u>agent and/or the new registered office address here</u> : | ddress on our records, <u>enter the nai</u> | me of the new registered |
| Name of New Registered Agent: | N/A | |
| New Registered Office Address: | / Enter Florida street address | |

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. Thereby confirm that the limited liability company has been notified in writing of this change.

City

_. Florida ___

Zip Code

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person</u> being added <u>or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

| <u>Title</u> | Name | Address | <u>Type of Action</u> |
|--------------|---------------|---|-----------------------|
| MGR | TIFFANY BAKER | 23223 Front Beach R | AI31 |
| | 1 | 23223 Front Breach A. Panama City Breach, FL : | <u>3413</u> Remove |
| | | | □ ⊡Change |
| | | | 🗆 Add |
| | | | 🗌 Remove |
| | | | □Change |
| · | | | 🗆 Add |
| | | | 🗆 Remove |
| | | | □Change |
| | | | 🗆 Add |
| | | | 🗆 Remove |
| | | <u> </u> | □Change |
| | | | 🗆 Add |
| | | | 🗆 Remove |
| | | | ⊡Change |
| | | | 🗆 Add |
| | | | CRemove |
| | | | □ Change |

• • •

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

| |
|----------|
| |
| |
| |
| |
| |
| <u> </u> |
| |
| |
| |
| |
| |
| |
| |
| |
| |
| |
| |
| |
| |

E. Effective date, if other than the date of filing: _______(optional) (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record 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 record is filed.

| Dated | June | 9 | · _ | 2022 | | | |
|-------|------|---|-----|--------------------|---|------------|--|
| | | | and | Henry | 5 | | |
| | | | | nber or authorized | | f a member | |
| | | 6 | | 5. Nenn | | | |

Typed or printed name of signee