K22000279508

(Reques	tor's Name)
(Address	s)
(Address	s)
(City/Sta	ite/Zip/Phone #)
PICK-UP	WAIT MAIL
(Busines	ss Entity Name)
(Docume	ent Number)
Certified Copies	Certificates of Status
Special Instructions to Filing	g Officer:
(Docume	ent Number) Certificates of Status





900390420409

S. CHATHAM OCT - 4 2022

07/05/22--01040--005 **50.60



COVER LETTER

TO: Registration Sect Division of Corpo			
SUBJECT: The	VIN+age Name of Limi	Jacay Company ited Liability Company	ny UC
The enclosed Articles of A	mendment and fee(s) are sub-	mitted for filing.	
Please return all correspond	dence concerning this matter	to the following:	
	Cori	Munro (C) Name of Person	
	The Vinta	Gl Vacay Co	mpany LLC
	9937 10	asmine Brook	Circk
	Land 0	City/State and Zip Code	<u>638</u>
	E-mail address. (e Va Cay Co O om to be used for future annual report notifi	cation)
For further information co	ncerning this matter, please ca	all:	
Cori Mu	Innow Person	at (<u>352</u>) <u>263 -</u> Area Code Daytime	OQQ3 Telephone Number
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)
Mailing Address: Registration So	ection	Street Address: Registration Sec	
Division of Co	rporations	Division of Corp	poracions

P.O. Box 6327 Tallahassee, FL 32314

TO:

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

The Vintage Vacay	Company LLC
(Name of the Limited Liability Company as it now (A Florida Limited Liability Con	appears on our records/) ppany)
The Articles of Organization for this Limited Liability Company were filed Florida document number <u>L 22 000 279.508</u>	1 12 12 22
This amendment is submitted to amend the following:	ocument number <u>L 22000279.508</u>
A. If amending name, enter the new name of the limited liability comp	any here:
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:	2.2
• •	1. 50.0 80.0
Timefat Office addition 12001 102 11 1771 102 1 1171 102 1	المعتبات ال
Fater new mailing address if applicables	77 2
.,	<u> </u>
Maining duaress MAT BE A POST OF FICE BOX	
B. If amending the registered agent and/or registered office address or agent and/or the new registered office address here:	our records, enter the name of the new registere
Name of New Registered Agent:	
New Registered Office Address:	oster Florida street address
•	
City	, Florida Zip Code
N. D. 's I.A. A. C'estano if the print Designation Accepts	•

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>		Type of Action
MGR	Alicia Jeffnes	1937 Jasmine Brook ar Land D Lakes in 34638	_ iXAdd
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□ Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□ Add
			□Remove
			□ Change
			□ Add
			□Remove
			□Change

-		_			<u> </u>				
-									
_			<u>-</u>						
_									
_						1.15			N. E
_									1 5 S
-									<u> </u>
-						_			<u> </u>
-									C3 5
-								·	
-	<u>-</u>			-				-	
_									
_							_ ·		
an eff lote:	fective date is list. If the date ins	ther than the ded, the date must certed in this blo e date on the Do	the specific and ock does not n	i carinot be prio neet the appli	cable statut	202 ling or more the ory filing requ	ın 90 days afte	onal) r tiling.) Pu is date will	suant to 605.020 not be listed a
recor Lis fi		lelayed effective	e date, but not	an effective	time, at 12:)1 a.m. on the	e earlier of: (l	b) The 90	th day after the
ated	_July	2nd		<u>262</u>	<u>-2</u> .		١		