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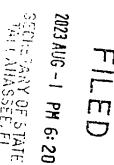
| (Requestor's Name) |
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| PICK-UP WAIT MAIL |
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| (Duringer Entity Name) |
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| Certifiec Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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Office Use Only



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COVER LETTER

| | egistration Se ivision of Cor | | | | |
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| | | N BEES, LLC | | | |
| SUBJECT | | Name of Lim | ited Liability Company | . | |
| The enclos | ed Articles of | Amendment and fec(s) are sub | mitted for filing. | | |
| Piease retu | rn all correspo | ondence concerning this matter | to the following: | | |
| | | STEPHANIE E. LASKO | | | |
| | | | Name of Person | | |
| | | DESTINATION BEES, L | LC | | |
| | | | Firm/Company | | |
| | | 125 E. MERRITT ISLAN | D CAUSEWAY, STE 107 #130 | | |
| | | · | Address | | |
| | MERRITT ISLAND, FLORIDA 32952 | | | | |
| | | | City/State and Zip Code | | |
| | | destinationbees@gmail.con | n to be used for future annual report no | titication) | |
| For fumbor | information o | oncerning this matter, please c | | ançanony | |
| | | • | | | |
| STEPHAN | ∛IE E. LASKO | | 321 427-8070 at () | | |
| | Name o | i Person | Area Code Daytii | ne Telephone Number | |
| Enclosed is | s a check for th | ne 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) | |
| R D P | tailing Address egistration Stivision of C O. Box 632 allahassee, I | Section Corporations 17 | Street Address: Registration So Division of Co The Centre of 2415 N. Monre | prporations | |
| · | | - | Tallahassee, F | | |

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| VACATION BEES, LLC | | | |
|--|---|---|--|
| (<u>Name of the Limi</u> | ted Liability Compa (A Florida Limited) | ny as it now appears on Liability Company) | our records.) |
| The Articles of Organization for this Limited L florida document number $\frac{1.23000124442}{1.0000124442}$ | | were filed on $\frac{03/09/2}{}$ | 023 and assigned |
| his amendment is submitted to amend the foll | | | |
| A. If amending name, enter the new name o | f the limited liab | ility company here: | |
| DESTINATION BEES, LLC | | | |
| he new name must be distinguishable and contain the | vords "Limited Liabi | lity Company," the design | ation "LLC" or the abbreviation "L.L.C." |
| Enter new principal offices address, if applicable: Principal office address MUST BE A STREET ADDRESS) | | 125 E. MERRITT ISLAND CAUSEWAY | |
| | | STE 107 #130 | |
| | | MERRITT ISLAND, FLORIDA 32952 | |
| Enter new mailing address, if applicable: | | 125 E. MERRITT IS | SLAND CAUSEWAY |
| Mailing address MAY BE A POST OFFICE | BOX) | STE 107 #130 | |
| | | MERRITT ISLAND, FLORIDA 32952 | |
| 3. If amending the registered agent and/or agent and/or the new registered office addressed of New Registered Agent: | • | address on our recor | ds, enter the name of the new regist |
| Name Danishan and COCC and Add | 126 P. AICHDITT ICL AND CALICEWAY CTC 107 H20 | | |
| New Registered Office Address: | | Enter Florida si | |
| | MERRITT ISL | .AND | , Florida <u>32952</u> |
| | | Cin | 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.

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 |
|--------------|-----------------------|--------------------------------|-----------------|
| MGR | STEPHANIE E. LASKO | 125 E. MERRITT ISLAND CAUSEWAY | 🗆 Add |
| | | STE 107 #130 | □Remove |
| | | MERRITT ISLAND, FLORIDA 32952 | = Change |
| MGR | ELIZABETH A. RICHMOND | 125 E. MERRITT ISLAND CAUSEWAY | □Add |
| | | STE 107 #130 | |
| | | MERRITT ISLAND, FLORIDA 32952 | ≡ Change |
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| n effective date is ote: If the date | other than the date of listed, the date must be spe inserted in this block do ive date on the Departm | ecific and cannot be prior ses not meet the applic | cable statutory filing | (optiona re than 90 days after filin requirements, this day | .) g.) Pursuant to 605.0207 c will not be listed as |
| ecord specifies is filed. | ı delayed effective date, | but not an effective t | ime, at 12:01 a.m. o | the earlier of: (b) | he 90th day after the |
| ted JULY 31 | | 2023 | | , | |
| | | ure of a member or auth | orized representative of | f a member | |
| | | | | | |