L23000176401

| (Requestor's Name) |
|---|
| (411,) |
| (Address) |
| |
| (Address) |
| |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| |
| (Business Entity Name) |
| |
| (Document Number) |
| |
| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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Office Use Only



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TESTATE PHIO: 21

R. HUNT OS/16/23

| Annabee V | acation Rentals, LLC | | |
|--|---------------------------------|---|-------------------------|
| SUBJECT: | Name of Lim | ited Liability Company | |
| the enclosed Articles of Amendment and fee(s) are submitted for filing. Part Person | | | |
| Please return all correspo | ondence concerning this matter | to the following: | |
| | Thomas Walsh | | |
| | | Name of Person | |
| | The Walsh Law Firm, LLC | 2 | |
| | | Firm/Company | |
| | One Financial Plaza, 10th | Floor | |
| | | Address | |
| | Fort Lauderdale, Florida 3 | 3394 | |
| | | City/State and Zip Code | . <u></u> |
| | • | | |
| | E-mail address: (| to be used for future annual report not | iffication) |
| For further information c | oncerning this matter, please c | all: | |
| Thomas Walsh | | 954 520-7039 | |
| Name o | f Person | Area Code Daytin | ne Telephone Number |
| Enclosed is a check for the | ne following amount: | | |
| ■ \$25.00 Filing Fee | | Certified Copy | Certificate of Status & |
| Mailing Addres | | Street Address: | |
| Registration S | | Registration Se Division of Co | |
| Division of C P.O. Box 632 | | The Centre of | - |

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Registration Section

Division of Corporations

Tallahassee, FL 32314

TO:

ARTICLES OF ORGANIZATION OF

| Annabee Vacation Rentals, LLC | | | |
|--|---|------------------------------------|----------------------|
| (<u>Name of the Limited Liability Compan</u> (A Florida Limited Li | y as it now appears on our reco ability Company) | ords.) | |
| The Articles of Organization for this Limited Liability Company well-bridge document number 1.23000176401 | vere filed on April 10, 2023 | | _ and assigned |
| This amendment is submitted to amend the following: | | | |
| A. If amending name, enter the new name of the limited liabil | ity company here: | | |
| The new name must be distinguishable and contain the words "Limited Liabilit | ty Company," the designation "I | LC" or the abbre | viation "L.L.C." |
| Enter new principal offices address, if applicable: | | , | |
| (Principal office address MUST BE A STREET ADDRESS) | | | - 15 - 15 - 15 |
| | | | co (|
| Enter new mailing address, if applicable: | | <u> </u> | |
| (Mailing address MAY BE A POST OFFICE BOX) | | E, FL | - <u></u> |
| B. If amending the registered agent and/or registered office a agent and/or the new registered office address here: | ddress on our records, <u>en</u> | ter the name | of the new register |
| Name of New Registered Agent: | | | |
| New Registered Office Address: | | | |
| New Neglinolett Villee Pregnetti | Enter Florida street aa | ldress | • |
| | | , Florida | |
| | City | | Zip Code |
| New Registered Agent's Signature, if changing Registered Agent: | | | |
| I hereby accept the appointment as registered agent and agro- provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office | performance of my duties provided for in Chapter 6 | s, ana 1 am jai 05, F.S. Or. if | this document is |

If Changing Registered Agent, Signature of New Registered Agent

company has been notified in writing of this change.

MGR = Manager

AMBR = Authorized Member

| <u>Title</u> | <u>Name</u> | Address | Type of Action |
|--------------|-----------------|-----------------------------|----------------|
| AMBR | *See Name Below | 211 N Ellesworth Ave, Apt 4 | = Add |
| | | San Mateo, CA 94401 | |
| | | | Change |
| MGR | Brendan Taylor | 211 N Ellesworth Ave, Apt 4 | |
| | | San Mateo. CA 94401 | ■ Remove |
| | | | Change |
| 2 | | | |
| | | | □Remove |
| | | | □Change |
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| | | | ∏Change |

| "Brendan Taylor and Beth | any Taylor, Trustees of | the Taylor F | amily Trust of A _l | orit 17, 2023" | | |
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| Tective date, if other than to an effective date is listed, the date of the date inserted in this acument's effective date on the | must be specific and cannot block does not meet the | e applicable | te of filing or more statutory filing re | (option than 90 days after ti quirements, this c | ling.) Pursuant to 605 | 5.0207 (ed as t |
| ecord specifies a delayed effect is filed. | rtive date, but not an eff | ective time, | at 12:01 a.m. on t | he earlier of: (b) | The 90th day after | r the |
| ited April 24 | 202 | 3 | | | | |
| | <u> </u> | | | | | |
| $\mathcal{L}\mathcal{L}$ | Signature of a membe | | | | | |