

M1500000 2670

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

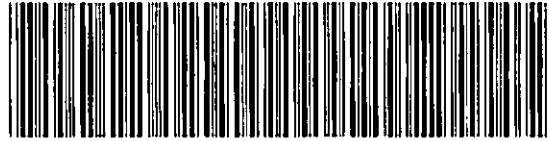
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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03/05/18--01026--004 ++25.00

2018 APR 18 PM 3:31
FILING OFFICE
MILWAUKEE, WISCONSIN

FILED

APR 16 2018
T. LEMIEUX

[Handwritten signature]

Date 12 Feb 2019

From: Joseph O'Bryant Sr

To: Florida Department of State

Subj: Changes in our business

Dear Sirs,

I would like to introduce myself, my name is Joseph W. O'Bryant Sr., I am the Senior Manager of Discover Vacation Rentals LLC. I would like for your department make the appropriate changes to our business file. Here is the document to show what we have done with the business and the register agent.

Thank you

Joseph

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Secluded Paradise Vacation Rentals LLC

Name of Foreign Limited Liability Company

Dear Sir or Madam:

The enclosed application, certificate and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Joseph OBryant Sr.

Name of Person

Discover Vacation Rentals LLC

Firm/Company

8980 Highway 100

Address

New Haven, Missouri 63068

City/State and Zip Code

apdvr@dvrentals.net

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Joseph OBryant Sr. at (573) 453 - 4511

Name of Person

Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

☒ \$25 Filing Fee

☐ \$30 Filing Fee &
Certificate of Status

☐ \$55 Filing Fee &
Certified Copy

☐ \$60 Filing Fee,
Certificate of Status &
Certified Copy



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 22, 2019

JOSEPH OBRYANT SR
8980 HWY 100
NEW HAVEN, MO 63068

SUBJECT: SECLUDED PARADISE VACATION RENTALS, LLC
Ref. Number: M15000002670

We have received your document for SECLUDED PARADISE VACATION RENTALS, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The designation of the registered agent must be at a Florida street address.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Tracy L Lemieux
Regulatory Specialist II

Letter Number: 119A00005369

RECEIVED

2019 APR 12 PM 2:18

SECRET
TALLAHASSEE, FL

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE
AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT
BUSINESS IN FLORIDA**

SECTION I (1-4 must be completed)

1. Name of limited liability company as it appears on the records of the Florida Department of State **Secluded Paradise Vacation Rentals LLC**

Enter new principal office address, if applicable **8980 Highway 100**
New Haven, Missouri 63068-2407

(Principal office address)
MUST BE A STREET ADDRESS

Enter new mailing address, if applicable **8980 Highway 100**
New Haven, Missouri 63068-2407

(Mailing address)
MUST BE A POST OFFICE BOX

2. The Florida document number of this limited liability company is: **M15000002670**

3. Jurisdiction of organization

4. Date authorized to do business in Florida **15 March 2013**

SECTION II (5-9 complete only the applicable changes)

5. New name of the limited liability company **Discover Vacation Rentals LLC**
(must contain "Limited Liability Company," "LLC," or "LLP")

If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the chairman or non-affiliated member adopting the alternate name. The alternate name must contain "Limited Liability Company," "LLC," or "LLP."

6. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

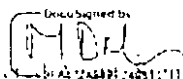
Name of New Registered Agent **Maurice Davidson**
New Registered Office Address **6110 Cypress Point Drive**

(not Florida street address)

Panama City **Florida** **32408**
(city) (state) (zip code)

New Registered Agent's Signature (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 set forth in Chapter 605, F.S. On this document is being filed to record, I have signed as the registered office address. I hereby confirm that the limited liability company has been notified of my appointment as agent.

UnSigned by


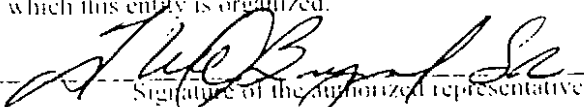
Print Name of Registered Agent and Signature of New Registered Agent

7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

8. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(c), indicate that change:

<u>Title / Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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9. Attached is a certificate, if required; no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized.


Signature of the authorized representative

Joseph OBryant Sr

Typed or printed name of signee

Filing Fee: \$25.00



State of Missouri

John R. Ashcroft, Secretary of State
Corporations Division
PO Box 778 / 600 W. Main St., Rm. 322
Jefferson City, MO 65102

LC1288046
Date Filed: 4/18/2018
John R. Ashcroft
Missouri Secretary of State

Amendment of Articles of Organization

(Submit with filing fee of \$25.00)

Charter #: LC1288046

1. The current name of the limited liability company is Secluded Paradise Vacation Rentals, LLC
2. The effective date of this document is the date it is filed by the Secretary of State of Missouri, unless a future date is otherwise indicated:

(Date may not be more than 90 days after the filing date in this office)

3. State date of occurrence that required this amendment: 4/18/2018
Month/Day/Year

4. The articles of organization are hereby amended as follows:

New Name (if applicable): Discover Vacation Rentals LLC

5. (Check if applicable) This amendment is required to be filed because:

- ☐ management of the limited liability company is vested in one or more managers where management had not been so previously vested
- ☐ management of the limited liability company is no longer vested in one or more managers where management was previously so vested
- ☒ a change in the name of the limited liability company.
- ☐ a change in the time set forth in the articles of organization for the limited liability company to dissolve.

6. This amendment is (check either or both):

- ☒ authorized under the operating agreement
- ☐ required to be filed under the provisions of RSMo Chapter 347
- ☐ both

In Affirmation thereof, the facts stated above are true and correct:

(The undersigned understands that false statements made in this filing are subject to the penalties provided under Section 575.040 RSMo)

Joseph W OBryant Sr
Authorized Signature

JOSEPH W OBRYANT SR
Printed Name

04/18/2018
Date

Name and address to return filed document:

Name: Joseph William

Address: Email: jwobryant@oblore.net

City, State, and Zip Code: _____

STATE OF MISSOURI



John R. Ashcroft
Secretary of State

CERTIFICATE OF AMENDED ARTICLES OF ORGANIZATION

WHEREAS,

Discover Vacation Rentals LLC
LC1288046

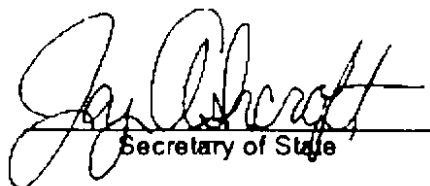
FORMERLY,

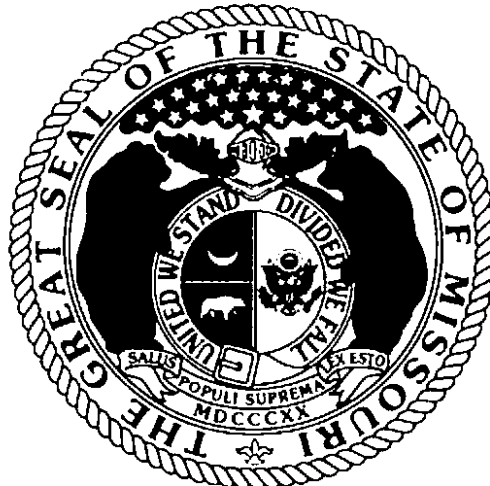
Secluded Paradise Vacation Rentals, LLC

filed its amended Articles of Organization with this office and WHEREAS that filing was found to conform to the Missouri Limited Liability Company Act;

NOW, THEREFORE, I, JOHN R. ASHCROFT, Secretary of State of the State of Missouri, by virtue of authority vested in me by law do hereby certify and declare that the above entity's Articles of Organization are amended.

IN TESTIMONY WHEREOF, I hereunto set my hand and cause to be affixed the GREAT SEAL of the State of Missouri. Done at the City of Jefferson, this 18th day of April, 2018.


Secretary of State





State of Missouri

John R. Ashcroft, Secretary of State

Corporations Division
PO Box 778 / 600 W. Main St., Rm. 322
Jefferson City, MO 65102

LC1288046
Date Filed: 8/1/2017
John R. Ashcroft
Missouri Secretary of State

Statement of Change of Registered Agent and/or Registered Office By a Foreign or Domestic For Profit or Nonprofit Corporation or a Limited Liability Company

Instructions

1. This form is to be used by either a for profit or nonprofit corporation or a limited liability company to change either or both the name of its registered agent and/or the address of its existing registered agent.
2. There is a \$10.00 fee for filing this statement.
3. PO Box may only be used in conjunction with a physical street address.
4. Agent and address must be in the State of Missouri.
5. The corporation may not act as its own agent.

Charter #: LC1288046

1. The name of the business entity is Secluded Paradise Vacation Rentals, LLC

2. The address, including street and number, of its present registered office (before change) is

9200 Litzinger Road

St. Louis, Missouri 63144

Address

City/State/Zip

3. The address, including street and number, of its registered office is hereby changed to:

8980 Highway 100

New Haven, Missouri 63068

Address (PO Box may only be used in conjunction with a physical street address)

City/State/Zip

4. The name of its **present** registered agent (before change) is: Mark Goldenberg (resigned 6/14/17)

5. The name of the **new** registered agent is: Joseph W. O'Bryant

Authorized signature of **new** registered agent must appear below:

(May attach separate originally executed written consent in this form in lieu of this signature)

6. The address of its registered office and the address of the business office of its registered agent, as changed, will be identical.

7. The change was duly authorized by the business entity named above.

In Affirmation thereof, the facts stated above are true and correct:

(The undersigned understands that false statements made in this filing are subject to the penalties provided under Section 575.040, RSMo)

Authorized signature of officer, member, manager or, if applicable, chairman of the board

Joseph W O'Bryant

Printed Name

Member

Title

27 July 2017

Date

Name and address to return filed document:

Name: Joseph O'Bryant

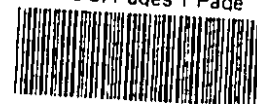
Address: 8980 Highway 100

City, State, and Zip Code: New Haven, Missouri 63068

P-ORI-07142017-0311

ORI-08032017-0251 State of Missouri

No of Pages 1 Page



Change Agent/Address