PD00000073950

(Re	equestor's Name)	···········
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	ısiness Entity Nar	me)
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Amend/Mame
To 3/11/10

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORP	ORATION:	FLORIDA RENTAL OPTIONS	S, INC.
DOCUMENT NU	MBER:	P06000073956	
The enclosed Artic	les of Amendment and fe	ee are submitted for filing.	
Please return all co	rrespondence concerning	g this matter to the following:	
		Ray Wofford	
		Name of Contact Person	
-		Firm/ Company	
-	6039	Cypress Gardens Blvd. #117	
		Address	
-	V	Vinter Haven, Fl. 33884 City/ State and Zip Code	
	rwoffo E-mail address: (to be	ord@acresidential.com used for future annual report notification)	
For further informa	tion concerning this mat	ter, please call:	
	Ray Wofford	at (863) 43	8.0033
Name	of Contact Person	Area Code & Daytime Tele	phone Number
Enclosed is a check	for the following amount	nt made payable to the Florida Departs	ment of State:
□ \$35 Filing Fee	\$43.75 Filing Fee & Certificate of Status	☐ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Ac Amendmen Division of P.O. Box 60 Tallahassee	t Section Corporations 327	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle	

Tallahassee, FL 32301



March 1, 2010

RAY WOFFORD 6039 CYPRESS GARDENS BLVD #117 WINTER HAVEN, FL 33884

SUBJECT: FLORIDA RENTAL OPTIONS, INC.

Ref. Number: P06000073956

We have received your document for FLORIDA RENTAL OPTIONS, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The current name of the entity is as referenced above. Please correct your document accordingly.

The name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

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) 245-6964.

Irene Albritton Regulatory Specialist II

Letter Number: 910A00004968

Articles of Amendment

to
Articles of Incorporation

Florida Ken	tal Option	ons, inc	
(Name of Corporation as curren	TODOO O TO	SQ5/0	
(Document Numb	ber of Corporation (if kno	own)	
Pursuant to the provisions of section 607.1006, amendment(s) to its Articles of Incorporation:	, Florida Statutes, this F	Clorida Profit Corporation adopts the	following
A. If amending name, enter the new name of	the corporation:	THE STATE OF THE S	7677
VACATION HO	MES ORLANDO, INC	CThe	new 759
name must be distinguishable and contain th abbreviation "Corp.," "Inc.," or Co.," or the a name must contain the word "chartered," "profe	designation "Corp," "Inc	c," or "Co". A professional corporat	
B. Enter new principal office address, if appli Principal office address <u>MUST BE A STREET</u>			
C. Enter new mailing address, if applicable:	TE POV		
(Mailing address <u>MAY BE A POST OFFIC</u>	<u>E BUX</u>)		
D. If amending the registered agent and/or renew registered agent and/or the new registered.		in Florida, enter the name of the	
Name of New Registered Agent:			
New Registered Office Address:	(Florida street d	address)	
_		, Florida	
	(City)	(Zip Code)	
New Registered Agent's Signature, if changing thereby accept the appointment as registered ag		and accept the obligations of the positi	on.
		d Accept if abouting	
St	gnature of New Registere	a Ageni, ij changing	

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added: (Attach additional sheets, if necessary)

<u>Title</u>	<u>Name</u>	Address	Type of Action
<u>PD</u>	XIOMARA WOFFORd	3500 Crump Rd Winter Hower H	☐ Add ☐ Remove
VP.	Klomara WoFford	3560 CrimpRd Winter Haven H	Add Remove
5TD	Ernest R. WOFFOrd	2560 Chen Rd Whiter Hoven F	Add Remove
E. <u>If amendir</u>	ng or adding additional Articles, enter c		(Add)
(attach add	itional sheets, if necessary). (Be specific	e) 	

provision	ndment provides for an exchange, reclass for implementing the amendment if neapplicable, indicate N/A)	•	
·			
	7.0000000000000000000000000000000000000		
			

The date of each amendr	nent(s) adoption: 1March 20 U
•	(date of adoption is required)
Effective date <u>if applicab</u>	(no more than 90 days after amendment file date)
Adoption of Amendment	(s) (CHECK ONE)
	s/were adopted by the shareholders. The number of votes cast for the amendment(s) as/were sufficient for approval.
	s/were approved by the shareholders through voting groups. The following statement ovided for each voting group entitled to vote separately on the amendment(s):
"The number of ve	otes cast for the amendment(s) was/were sufficient for approval
by	, , , , , , , , , , , , , , , , , , , ,
	(voting group)
action was not require	
The amendment(s) was action was not required	s/were adopted by the incorporators without shareholder action and shareholder d.
Dated_	March 9, 2010
Signatu	re Ray Voffen
	(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court
	appointed fiduciary by that fiduciary)
	(Typed or printed name of person signing)
	(Typed or printed name of person signing)
	President
	(Title of person signing)