P150000 30100

(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



800338999418

01/13/20--01015--003 ++93.00

2020 J 11 13 FH 12: 14

R. WHITE FEB 11 2000

COVER LETTER

Division of Corporations
NAME OF CORPORATION: Southern Dream Vocation Rentals & Management, Inc. document number: P1500030100
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Shawna Davis Name of Contact Person Southern Dream Vacation Rentals & Management, Inc Firm/ Company PD Bry 2N/8 Address Davenport, FL 3383 6 City/ State and Zip Code Shawna @ Southarndream Vacation Ventals.com
E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call:
SNAWNA DAVIS at (Slo3) 424 - 9162 Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
S43.75 Filing Fee & S43.75 Filing Fee & S52.50 Filing Fee & Certificate of Status Certificate of Status (Additional copy is enclosed) S43.75 Filing Fee & S52.50 Filing Fee & Certificate of Status (Additional Copy is enclosed)
Mailing Address Street Address

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

TO: Amendment Section

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Articles of Amendment to

Articles of Incorporation of

Southern Dream Vacation (Name of Corporation as currently)	Tentils it Management, In.
(Document Number of	Ob Companyion (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this Faits Articles of Incorporation:	•
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation." "co "Inc.," or Co.," or the designation "Corp." "Inc," or "Co". A "chartered," "professional association," or the abbreviation "P.A."	mpany," or "incorporated" or the abbreviation "Corp.," professional corporation name must contain the word
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered office addresses new registered agent and/or the new registered office address:	ss in Florida, enter the name of the
Name of New Registered Agent	
(Florida stree	t address)
New Registered Office Address:	, Florida
	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with	th and accept the oblivations of the position.
, , , , , , , , , , , , , , , , , , ,	and the position.
Signature of New Reg	istered Agent, if 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)

Example:

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

X Change	<u>PT</u> <u>John</u>	n Doe	
X Remove	<u>V</u> <u>Mik</u>	te Jones	
X Add	SV Sall	y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change			
Add			4
Remove			
2) Change		Steven Davis	217 Sunny Acres Rd
Add			Davenport, FL 33837
Remove Change			
Add			
Remove			
4) Change			
Add			
Remove			WAR.
5) Change			
Ađd			
Remove			
6) Change			
Add			<u></u>
Remove			

. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)				
10090	Shares	to s	Shawna	Davis
. 144 =	12.			
		 .		,
188				
		- r		
				7.01
				·
	ovides for an exchange, rementing the amendmen e, indicate N/A)			
All sho	ares are	+0	Shawna	a Davis
10000	to Shaw	00	auis	
	<u> </u>	<u> </u>	, <u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	

The date of each amendment(s) adop date this document was signed.	tion: <u>Jan 7, 2020</u>	, if other than th
Effective date if applicable:	(no more than 90 days after amendment file date)	
	(no more than 90 days after amenament file date)	
Note: If the date inserted in this block document's effective date on the Depart	c does not meet the applicable statutory filing requirements, this date witment of State's records.	Il not be listed as th
Adoption of Amendment(s)	(CHECK ONE)	
the amendment(s) was/were adopte by the shareholders was/were suffice	d by the shareholders. The number of votes east for the amendment(s) ient for approval.	
	ed by the shareholders through voting groups. The following statement h voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for	the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) is/are being filed	pursuant to s. 607.0120 (11) (e), F.S.	
The amendment(s) was/were adopte action was not required.	d by the incorporators, or board of directors without shareholder action an	d shareholder
Dated	7/2020	
Signature	hawna L. Laury	_
	tor, president or other officer - if directors or officers have not been	
	y an incorporator – if in the hands of a receiver, trustee, or other court fiduciary by that fiduciary)	
- Priming		
<u> </u>	Shawna Li Davis	
	(Typed or printed name of person signing)	
	President	
(Tir	le of person signing)	