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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: APPLE VACATI	ON HOMES, INC		
DOCUMENT NUMBER: P18000004500			
The enclosed Articles of Amendment and fee are sub	mitted for filing.		
Please return all correspondence concerning this matt	er to the following:		
LINDA M ANGELES			
	Name of Contact Persor	1	
PROFESSIONAL ACCOUNT	TING & TAX SERVICES		
	Firm/ Company		
1420 CELEBRATION BLVD	• •		
	Address		
CELEBRATION, FL 34747			
	City/ State and Zip Code	:	
ADMIN@PROFESSIONALTAXIN	IC.COM		
	d for future annual report	notification)	
For further information concerning this matter, please	call:		
LINDA M ANGELES	407 at (429-4364	
Name of Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check for the following amount made p.	ayable to the Florida Depa	rtment of State:	
S35 Filing Fee S43.75 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 Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle		

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

APPLE VACATION HOMES, INC.

(Name of Corporation	as currently filed with the Florida Dept. of State)
P18000004500	
(Documer	nt Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida S ts Articles of Incorporation:	Statutes, this Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corp	poration:
	The new
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp," word "chartered," "professional association," or the al	"corporation," "company," or "incorporated" or the abbreviation "Inc," or "Co". A professional corporation name must contain the bbreviation "P.A."
B. Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDR	<u></u>
	
C. Enter new mailing address, if applicable:	型 四 五
(Mailing address MAY BE A POST OFFICE BOX	
 If amending the registered agent and/or registered new registered agent and/or the new registered of 	
Name of New Registered Agent	
·-	
	(Florida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Regist	tered Agent:
	am familiar with and accept the obligations of the position.
Signat	ture of New Registered 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)

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

P = President; V = Vice President; $\tilde{T} = Treasurer$; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CEO = 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.

Example: X Change	<u>PT</u>	John Doe			
X Remove	\underline{V}	Mike Jones			
X Add	<u>sv</u>	Sally Smith			
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s		
1) Change	P	SEAN YOUNG	7343 W SAND LAKE ROAD		
Add			APT 345		
X Remove			ORLANDO FL 32819		
2) X Change	P	PHILIP A YOUNG	427 CHADWICK DRIVE		
Add			DAVENPORT FL 33837		
Remove					
3) Change					
Add					
Remove					
4) Change					
Add					
Remove					
5) Change					
Add					
Remove					
6) Change					
Add					
Remove					

f an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	Attach <i>additional</i> s	ding additional Article heets, if necessary).	(Be specific)				
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provisions for implementing the amendment if not contained in the amendment itself:	f an amendment	provides for an exchar	nge, reclassificat	tion, or cancellat	ion of issued sha	ares,	
(If not applicable, indicate N/A)	provisions for im	plementing the amend	lment if not cont	tained in the ame	endment itself:		
	(if not applica	ible. indicate N/A)					
						<u>.</u>	
	<u>.</u>						
					-		_

		, if other than
date this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does document's effective date on the Department o	not meet the applicable statutory filing requirements, this d f State's records.	ate will not be listed as
Adoption of Amendment(s) (CI	HECK ONE)	
■ The amendment(s) was/were adopted by the by the shareholders was/were sufficient for	e shareholders. The number of votes cast for the amendment approval.	(s)
	he shareholders through voting groups. The following statem og group entitled to vote separately on the amendment(s):	nent
"The number of votes east for the amo	endment(s) was/were sufficient for approval	
by	.**	
(ve	oting group)	
☐ The amendment(s) was/were adopted by the action was not required.	e board of directors without shareholder action and sharehold	ler
☐ The amendment(s) was/were adopted by the action was not required.	e incorporators without shareholder action and shareholder	
Dated	2018	
Signature	6	
selector, by an inc	sident or other officer – if directors or officers have not been corporator – if in the hands of a receiver, trustee, or other coury by that fiduciary)	
PHILIF	YOUNG	
	(Typed or printed name of person signing)	
PRESID	DENT	
	(Title of person signing)	

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