

L14000047834

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

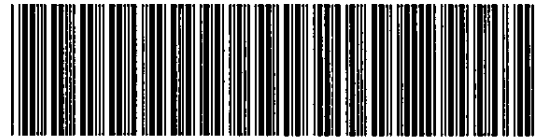
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000258174790

04/03/14--01010--021 **25.00

APR - 7 2014
T CLINE

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2014 APR - 3 PM 1:08

FILED

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: QUEEN TRAVELS & SERVICES LLC


Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Israel Martinez

Name of Person



Firm/Company

8271 SW 157TH AVE # 602

Address

Miami, FL 33193

City/State and Zip Code

imartinez@queentra.com

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

For further information concerning this matter, please call:

Israel Martinez

Name of Person

at **786 368-1754**

Area Code

Daytime Telephone Number

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2014 APR -3 PM 1:08

FILED

Enclosed is a check for the following amount:

- \$25.00 Filing Fee
- \$30.00 Filing Fee & Certificate of Status
- \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)
- \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

QUEEN TRAVELS & SERVICES LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 03/24/2014 and assigned Florida document number L14000047834.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. 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: Israel Martinez

New Registered Office Address: 8271 SW 157TH AVE # 602
Enter Florida street address

Miami, Florida 33193
City Zip Code

New Registered Agent's Signature, if 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 registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.


If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager
AMBR = Authorized Member

<u>Title</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
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove

2014 APR 23 PM 1:08
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

FILED

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

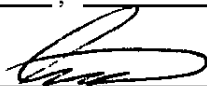
Please remove the letters I and SR from my name thank you.

Please see the attach document on back.

E. Effective date, if other than the date of filing: _____ (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated _____, _____.



Signature of a member or authorized representative of a member

Israel Martinez

Typed or printed name of signer

Page 3 of 3
Filing Fee: \$25.00

2014 FEB -3 PM 1:03
SECRETARY OF STATE
ALLAHSEE, FLORIDA

FILED



Florida Limited Liability Company

QUEEN TRAVELS & SERVICES LLC

Filing Information

	L14000047834
FEI/EIN Number	NONE
Date Filed	03/24/2014
State	FL
Status	ACTIVE
Effective Date	03/24/2014

Principal Address

602
MIAMI, FL 33193

Mailing Address

602
MIAMI, FL 33193

Registered Agent Name & Address

MARTINEZ, ISRAEL I, SR
8271 SW 157TH AVE
602
MIAMI, FL 33193

Name & Address

Title MGR

MARTINEZ, ISRAEL I, SR
8271 SW 157TH AVE # 602
MIAMI, FL 33193

Annual Reports

No Annual Reports Filed