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(Re	equestor's Name)	
(Ac	ddress)	
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(Do	ocument Number)	
Certified Copies	Certificates	of Status
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CORPORATE ACCESS, ____

When you need ACCESS to the world

INC.

236 East 6th Avenue. Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

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SPECIAL INSTRUC				

COVER LETTER

Tallahassee, FL 32314

	Registration Se Division of Co							
CHD ITT		VEL DREAMERS LLC						
SUBJEC	1:	Name of Lim	ited Liability Company					
The enclo	osed Articles of	Amendment and fee(s) are sub	mitted for filing.					
		ondence concerning this matter	_					
		HECTOR M GUTIERREZ	2					
			Name of Person					
		THE TRAVEL DREAME	RS LLC					
			Firm/Company		20	ijon Iom		
		17516 SW 33RD CT			FEB	. 1		
		<u> </u>	Address		-7	FILED FILED		
		MIRAMAR FL 33029			T. o.			
		ADA@BRAVOACCOUN"	City/State and Zip Code		l;: 59	GLT.E.G SIMES		
		E-mail address: (to be used for future annual report noti	fication)		ب اب		
For furthe	er information c	concerning this matter, please c	all:					
ADA F B	BRAVO		954 963-8771 at ()					
	Name e	of Person		e Telephone Number	-			
Enclosed	is a check for t	he following amount:						
■ \$25.0	00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fe Certificate of St Certified Copy tadditional copy is	tatus &			
Ī	Mailing Addres	Section	Street Address: Registration Sec					
	Division of C P.O. Box 632		Division of Corporations The Centre of Tallahassee					

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

THE TRAVEL DREAMERS LLC		2
(Name of the Limited Liability Comp	any as it now appears on our records.	- 9 45
(A Florida Limited	any as it now appears on our records. Liability Company)	
The Articles of Organization for this Limited Liability Companies Elorida document number $\frac{L20000030059}{L20000030059}$.	y were filed on 01/30/2020	and assigned
This amendment is submitted to amend the following:		Falkitor PM 4: 52
A. If amending name, enter the new name of the limited lia	bility company here:	7)
The new name must be distinguishable and contain the words "Limited Liab	ility Company." the designation "LLC"	or the abbreviation "L.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 agent and/or the new registered office address here:	address on our records, <u>enter tl</u>	he name of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, , Flor	ida
	City	Zip Crode
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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

Title	<u>Name</u>	<u>Address</u>	Type of Action
AMBR	CLAURDIA GUTIERREZ	17516 SW 33RD CT	□Add
		MIRAMAR, FL 33029	■Remove
			□Change
MGR	CLAURDIA GUTIERREZ	17516 SW 33RD CT	□Add
		MIRAMAR, FL 33029	≣Remove
			□ Change
AMBR	CLAUDIA GUTIERREZ	17516 SW 33RD CT	≣Add
		MIRAMAR, FL 33029	□Remove
			□Change
MGR	CLAUDIA GUTTERREZ	17516 SW 33RD CT	\
		MIRAMAR, FL 33029	□Remove
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ctive date, if other than the d	ate of filing	1/30/2020			(optio	nal)	
effective date is listed, the date must be \underline{v} . If the date inserted in this block	e specific and k does not m	cannot be prior	to date of filing	g or more than filing requi	90 days after t	iling.) Pursuant date will not b	to 605.02 se listed
nment's effective date on the Dep	artment of St	tate's records.		5			re nated
ord specifies a delayed effective filed.	date, but not a	an effective ti	me, at 12:01	a.m. on the c	arlier of: (b)	The 90th day	y after th
d FEBRUARY 06		2020					
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Filing Fee: \$25.00