

**MD80000003856**

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

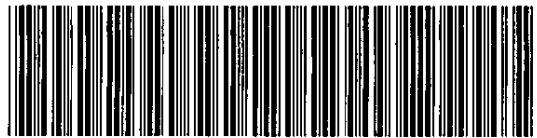
Special Instructions to Filing Officer:

**L. SELLERS**

**JUN 16 2009**

**EXAMINER**

Office Use Only



**900157045489**

06/12/09--01068--004 \*\*30.00

**FILED**  
09 JUN 15 AM 8:29  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA



June 4, 2009

**Via U.S. Mail**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

Re: Application by Foreign Limited Liability Company to File Amendment to  
Application for Authorization to Transact Business in Florida for TraveLeaders, LLC

Dear Sir or Madame:

Enclosed for your review is an Amendment to Application for Authorization to Transact Business in Florida for the above referenced entity changing its name to Travel Leaders Corporate, LLC. Also included, is a certificate evidencing the change from the Secretary of State of Delaware along with a check in the amount of \$30.00 dollars. Please contact me with any questions.

Sincerely,

Matt Robinson  
Travel Leaders Group, LLC  
6442 City West Parkway  
Eden Prairie, MN 55344  
952-914-6822  
[mrobinson@tagtrvl.Com](mailto:mrobinson@tagtrvl.Com)

Enc.

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** TravelLeaders LLC  
Name of Foreign Limited Liability Company

Dear Sir or Madam:

The enclosed application, certificate and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Matt Robinson

Name of Person

Travel Leaders Group, LLC

Firm/Company

6442 City West Parkway

Address

Eden Prairie, MN 55344-3245

City/State and Zip Code

mrobinson@tagtrvl.com

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

For further information concerning this matter, please call:

Matt Robinson

Name of Person

at ( 952 )

914-6822  
Area Code & Daytime Telephone Number

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

**Enclosed is a check for the following amount:**

\$25 Filing Fee

\$30 Filing Fee &  
Certificate of Status

\$55 Filing Fee &  
Certified Copy

\$60 Filing Fee,  
Certificate of Status &  
Certified Copy

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE  
AMENDMENT TO APPLICATION FOR AUTHORIZATION TO TRANSACT  
BUSINESS IN FLORIDA**

**SECTION I (1-3 must be completed)**

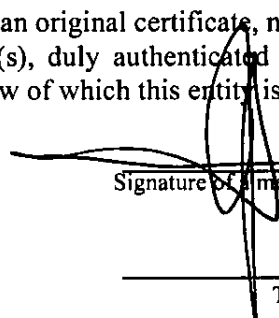
1. Name of limited liability company as it appears on the records of the Florida Department of State: TravelLeaders LLC
2. Jurisdiction of its organization: Delaware
3. Date authorized to do business in Florida: 8/20/2008

**SECTION II (4-7 complete only the applicable changes)**

4. If the amendment changes the name of the limited liability company, when was the change effected under the laws of its jurisdiction of organization? May 18, 2009
5. New name of the limited liability company: Travel Leaders Corporate LLC  
(must end with "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must end with "Limited Liability Company," "L.L.C." or "LLC.")

6. If the amendment changes the period of duration, indicate new period of duration:  
\_\_\_\_\_
7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:  
\_\_\_\_\_
8. If the amendment corrects any false statement, indicate the statement being corrected and the correction: \_\_\_\_\_
9. Attached is an original certificate, no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized.

  
\_\_\_\_\_  
Signature of a member or the authorized representative of a member  
  
\_\_\_\_\_  
JD O'Hara Secretary  
\_\_\_\_\_  
Typed or printed name of signee

**Filing Fee: \$25.00**

**FILED**  
09 JUN 15 AM 8:29  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

# Delaware

PAGE 1

*The First State*

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT COPY OF THE CERTIFICATE OF AMENDMENT OF "TRAVELEADERS LLC", CHANGING ITS NAME FROM "TRAVELEADERS LLC" TO "TRAVEL LEADERS CORPORATE LLC", FILED IN THIS OFFICE ON THE EIGHTEENTH DAY OF MAY, A.D. 2009, AT 5:13 O'CLOCK P.M.

FILED

09 JUN 15 AM 8:29

SECRETARY OF STATE  
TALLAHASSEE FLORIDA



4514070 8100

090490519

You may verify this certificate online  
at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

  
Jeffrey W. Bullock, Secretary of State  
AUTHENTICATION: 7311367

DATE: 05-19-09