L10000126233

(Re	questor's Name)	
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(Cit	y/State/Zip/Phon	e #)
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NV AUG 27 AM "9: O

J. SAULSBERRY EXAMINER AUG **29** 2012

COVER LETTER

TO:

TO:	Registration S Division of Co		·			
SUBJE	ст:	Amazo	n Voyages LLC			
			ited Liability Company			
The end	closed Articles o	f Amendment and fee(s) are su	bmitted for filing.			
Please i	return all corresp	ondence concerning this matte	r to the following:			
			Alfredo J. Begazo Name of Person			
						•
			Firm/Company			
<u></u> _		567 High Hawk Circle Address	· · · · · · · · · · · · · · · · · · ·	2012 SE		
		Ve	ro Beach, Florida 32962		2012 AUG 2 SECRETAF ALLAHAS	k k
			City/State and Zip Code		YY (l ∳ ₽™ny-
For furt	ther information	E-mail address: concerning this matter, please	egazo@surbound.com (to be used for future annual report notifica call:	ition))F STATE , FLORID	
	Alfr	edo J. Begazo	at (772)	66-5587		
	Name	of Person	Area Code & Daytime	l'elephone Number		
Enclose	ed 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)	Certified	te of Status &	losed)
	Regis Divisi P.O. E	LING ADDRESS: tration Section ion of Corporations Box 6327 nassee, FL 32314	STREET/COURIE Registration Section Division of Corporat Clifton Building 2661 Executive Cent Tallahassee, FL 3230	ions er Circle	·	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Amazon V	oyages Limi	ted Liability C	ompany	
(<u>Name of the Limite</u> ()	A Florida Limited I	Liability Company)	s on our records.)	
The Articles of Organization for this Limited I	iability Company	were filed on	12/09/2010	and assigned
Florida document numberL1000012	6233			
This amendment is submitted to amend the fol	lowing:			
A. If amending name, enter the new name o	of the limited liab	oility company her	<u>e</u> :	
Surbound E	Expeditions Lin	nited Liability Co	mpany	
The new name must be distinguishable and end w 'L.L.C."	ith the words "Lim	ited Liability Compa	ny." the designation	*LLC" or the abbreviation
Enter new principal offices address, if appli	cable:	Same		
(Principal office address MUST BE A STREET ADDRESS)				2012 SE
				1
		•		PAR ASS
Enter new mailing address, if applicable:		Same		
Mailing address MAY BE A POST OFFICE BOX)				FLOUR STA
	,	<u>•</u>	·	AIF 8 —
				2
B. If amending the registered agent and			our records, <u>enter</u>	the name of the nev
registered agent and/or the new registered of	office address her	<u>'e</u> :		
Name of New Registered Agent:	Same			
New Registered Office Address:				
		Ent	ter Florida street ac	ldress
			Florida _	
		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 608, 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 Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager

MGRM = N	Managing Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
	·		
	· 		AddRemove
			Add Remove
	•		Add Remove
			Domaii.
D. If amend	ding any other information, en	ter change(s) here: (Attach additional sheets, if nec	2012 AUG 27 SECRETARY OF TALLAHASSEE
Dated	August 24	2012	AM '9: 02
	Signature o	a-member or authorized representative of a member Alfredo J. Begazo	· · · · ·
		Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00