

LD1 0000008849

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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(Business Entity Name)

(Document Number)

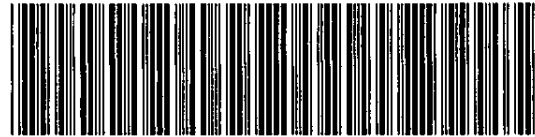
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COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: CARIBBEAN ISLANDS TRAVEL L.L.C.
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:

RAUL RIO

Name of Person

Firm/Company

3363 W. COMMERCIAL BLVD. SUITE 202

Address

FT. LAUDERDALE, FLORIDA 33309

City/State and Zip Code

rrio@intervalservicing.com

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

For further information concerning this matter, please call:

RAUL RIO

Name of Person

at (**954**)

485-5400

Area Code & Daytime Telephone Number

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

CARIBBEAN ISLANDS TRAVEL L.L.C.

Page 1 of 2

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

MGR = Manager
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	DAVID F. WRIGHT	3363 W. COMMERCIAL BLVD. SUITE 202 FT. LAUDERDALE, FLORIDA 33309	☐ Add ☒ Remove
MGRM	LUIS A. MEDINA	3363 W. COMMERCIAL BLVD. SUITE 202 FT. LAUDERDALE, FLORIDA 33309	☒ Add ☐ Remove
MGR.	LUIS A. MEDINA	3363 W. COMMERCIAL BLVD. SUITE 202 FT. LAUDERDALE, FLORIDA 33309	☐ Add ☒ Remove
MGR.	RAUL RIO	3363 W. COMMERCIAL BLVD. SUITE 202 FT. LAUDERDALE, FLORIDA 33309	☒ Add ☐ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove

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

N/A

Dated 22ND DAY OF JUNE, 2012

Signature of a member or authorized representative of a member

LUIS A. MEDINA

Typed or printed name of signee