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(City/State/Zip/Phone #)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

M. THOMAS
DEC -7 2009
EXAMINER

JOSEPH A. TROIANO ESQ., PA

A PROFESSIONAL ASSOCIATION

JOSEPH A. TROIANO, ESQ. CPA. LL.M.*
239.823.5222 CELL
JTROIANO@JOSEPHTROIANOPA.COM

12800 UNIVERSITY DRIVE, SUITE 380
FORT MYERS, FLORIDA 33907
239.482.3998 TELEPHONE
239.466.2866 FAX

December 1, 2009

PRIVATE & CONFIDENTIAL

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

RE: XPRESS SUN TRAVEL, LLC

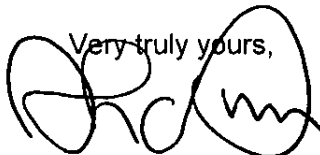
Dear Sir or Madam:

Enclosed for filing is an Articles of Amendment to Articles of Organization of XPRESS SUN TRAVEL, LLC together with our check in the amount of \$30.00 for the required filing fees.

After the Articles of Amendment is filed, please return a copy to this Office in the postage-paid return envelope that we have enclosed.

Thank you for your assistance. Should you have any questions or require additional information, please feel free to contact me.

Very truly yours,



Joseph A. Troiano, Esq.
For the Firm

JAT/jdc
Enclosures

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: XPRESS SUN TRAVEL, 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:

JOSEPH A. TROIANO, ESQ.

Name of Person

JOSEPH A. TROIANO, ESQ., P.A.

Firm/Company

12800 UNIVERSITY DRIVE, SUITE 380

Address

FORT MYERS, FL 33907

City/State and Zip Code

JTROIANO@JOSEPHTROIANOPA.COM

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

For further information concerning this matter, please call:

JOSEPH A. TROIANO, ESQ.

Name of Person

at (239)

482-3998

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

XPRESS SUN TRAVEL, LLC

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:

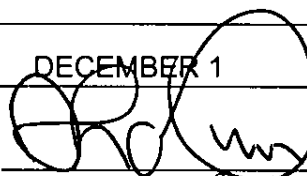
MGR = Manager
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
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_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove

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

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 TALLAHASSEE, FLORIDA

Dated DECEMBER 1, 2009

 Manager

Signature of a member or authorized representative of a member

JOSEPH A. TROIANO, MANAGER

Typed or printed name of signee