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SECRETARY OF STATE
TALLAHASSEE, FLORID

T. CLINE

MAY - 5 2008

EXAMINER

COVER LETTER

TO: Registration Section ', Division of Corporations
SUBJECT: Toni M I glesias VTB TIGGY 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:
Toni M. Igleslas (Name of Person)
(Firm/Company)
5560 Berkshire Onlye, #203
5560 Borkshire Drive, #203 (Address) FORT Myers, FL 33918 (City/State and Zip Code)
For further information concerning this matter, please call:
For further information concerning this matter, please call: Toni M. Igles as at (239) 470-7131 (Name of Person) (Area Code & Daytime Telephone Number) TONI M. Igles as at (239) 470-7131 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\ \text{Certificate of Status} \text{S55.00 Filing Fee & Certified Copy (additional copy is enclosed)} \text{\$\text{S60.00 Filing Fee, Certified Copy (additional copy is enclosed)}} \text{\$\text{Certified Copy (additional copy is enclosed)}} \text{\$\text{Certified Copy (additional copy is enclosed)}} \text{\$\text{\$\text{Certified Copy (additional copy is enclosed)}}} \text{\$\text{\$\text{\$\text{Certified Copy (additional copy is enclosed)}}} \$\text{\$\t
MAILING ADDRESS: STREET/COURIER ADDRESS:

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

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

' ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

$T_{i} = T_{i}$	VITOLTICAL	110		
Name of the Limited L	SIGS YTB TI 664 lability Company as it now appears of lorida Limited Liability Company)	n our records.)		
		1/2 /		
The Articles of Organization for this Limited Liab		and assigned		
Florida document number <u>LØ7ØØØØØ</u>	<u>3500</u> .			
This amendment is submitted to amend the follow	ving:			
A. If amending name, enter the new name of t	he limited liability company here:			
Toni M. Iglesias WV Travel		1 22		
The new name must be distinguishable and end with	the words "Limited Liability Company	"the designation "LEGFor the abbreviation		
L.L.C.		ARET		
"L.L.C." B. If amending the registered agent and/or registered agent and/or the new registered office.	ragistared office address on our	records enter the harms of the good		
registered agent and/or the new registered office	ce address here:	Tecords, enter the passic of the new		
		FLICE:		
		21 REF 21		
Name of New Registered Agent:	····			
New Registered Office Address:				
*	(Enter	(Enter Florida street address)		
		, Florida		
	(City)	(Zip Code)		
	<u>\</u> .			
New Registered Agent's Signature, if changing Re	gistered 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, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = N	Annaging Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add Remove
			Add Remove
			Add Remove
 			Add Remove
			Add Remove
			Add Remove
D. If amen	ding any other information, enter chang	ge(s) here: (Attach additional sheets, if necesso	ary.)
			2000 MAY -2 SECRETARY
Dated	foril 29 , 200	08	-2 PM 12: 21 ARY OF STATE ASSEE, FLORIDA
		er or authorized representative of a member	>
	Typec	es/as For printed name of signee	

Page 2 of 2

Filing Fee: \$25.00