## #107000080646

(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:

Office Use Only



400230981694

04/24/12--01026--013 \*\*25.00

FILED 12 APR 26 PM 3: 06 BEGGETART OF STATE

examiner Examiner APR 30 2012



April 26, 2012

TRAVEL & TOURS GLOBAL MANAGEMENT CORP. LLC MARIBEL MORALES 499 NW 101 AVE. CORAL SPRINGS, FL 33071

SUBJECT: LENNY BANKS HOLDINGS L.L.C.

Ref. Number: L07000080646

We have received your document for LENNY BANKS HOLDINGS L.L.C. and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of the entity cannot include "CORP." This word/abbreviation is readily associated with or is commonly used to denote another type of entity. Please amend your document throughout accordingly.

If you have any questions concerning the filing of your document, please call (850) 245-6870.

Karen A Saly Regulatory Specialist II

Letter Number: 412A00012773

## **COVER LETTER**

1 7 7

TO:

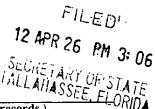
**Registration Section** 

Tallahassee, FL 32314

Division of Corporations					
SUBJECT:	LENNY BANK	KS HOLDINGS L.L.	C.		
		ited Liability Company	····		
The analoged Articles of	Amendment and fee(s) are su	hmittad for filing			
		_			
Please return all correspo	ndence concerning this matte	r to the following:			
		MARIBEL MORALES	<u></u>		
		Name of Person			
	TRAVEL & TOURS	GLOBAL MANAGEM	ENT CORP. LLC		
	Firm/Company				
	499 NW 101 AVENUE				
		Address			
	CORAL SPRINGS, FL 33071				
		City/State and Zip Code			
		TRAVELMGTCORP.			
For further information co	oncerning this matter, please of	call:			
MARIE	BEL MORALES	at ( 855 )	954-8687		
Name of			Daytime Telephone Number		
Enclosed is a check for th	e following amount:		·		
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is en	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
MAILI	ING ADDRESS:	STREET/C	OURIER ADDRESS:		
	ation Section	Registration	Section		
P.O. Bo	n of Corporations ox 6327	Division of Clifton Build			

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**



## LENNY BANKS HOLDINGS L.L.C

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were	filed on	08/07/2007	and assigned
Florida document number L0700080646			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liability of	ompany here	<b>2</b> :	
TRAVEL & TOURS GLOBAL MANA	AGEMENT	COMPANY L.L.	.C.
The new name must be distinguishable and end with the words "Limited Li "L.L.C."	ability Compar	ny," the designation "L	LC" or the abbreviation
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)	<u>-</u>		
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)  B. If amending the registered agent and/or registered office a registered agent and/or the new registered office address here:	ddress on o	ur records, <u>enter tl</u>	he name of the new
The state of the new registered office address field.			
Name of New Province of Accord			
Name of New Registered Agent:		er Florida street addı	resis
Name of New Registered Agent:			ress

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:

<u> Title</u>	<u>Name</u>	Address	Type of Action
· · · · · · · · · · · · · · · · · · ·	<del></del>		Add Remove
	·		☐ Add ☐ Remove
			Add
			Remove Add
			Remove
	<del></del>	· · · · · · · · · · · · · · · · · · ·	Add Remove
			Add Remove
. If amend	ing any other information, enter change	e(s) here: (Attach additional sheets, if necessary.)	_
	,		<del>-</del>
			_
ated	APRIL 7 , 20	12	

Page 2 of 2

Filing Fee: \$25.00