

120011000110875

Florida Department of State  
Division of Corporations  
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Fax Number : (850) 617-6383

From: Account Name : LEGALZOOM.COM INC.  
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L. SELLERS

MAY - 5 2011

EXAMINER

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LLCAMND/RESTATE/CORRECT OR M/MG RESIGN  
ONYX INTERNATIONAL TRAVEL LLC

Certificate of Status	0
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**FAX COVER SHEET**

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**TO**

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**COMPANY**

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**FAX NUMBER** 18506176383

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**FROM** Tony Burroughs

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**DATE** 2011-05-03 17:18:26 PDT

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**RE** FL SOS - LZ order # 500495014

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**COVER MESSAGE**

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Tony Burroughs | Business Special Filing/501(c)(3) Specialist 323.962.8600 |  
tburroughs@legalzoom.com<mailto:tburroughs@legalzoom.com>  
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## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: ONYX INTERNATIONAL 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:

Barbara Dang  
(Name of Person)

Legalzoom.com, Inc.  
(Firm/Company)

100 W. Broadway Suite 100  
(Address)

Glendale, CA 91210  
(City/State and Zip Code)

For further information concerning this matter, please call:

Barbara Dang at ( 323 ) 962-8600  
(Name of Person) (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

APR/21/2011/THU 07:55 AM

ENQUIRE SENIOR-CLWR

PAA NO. 121 401 3013

P. 004

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

ONYX INTERNATIONAL TRAVEL LLC

(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 11/18/2009 and assigned  
Florida document number L09000110875.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent: CHRISTOPHER LYON

New Registered Office Address: 8433 121st St.  
(Enter Florida street address)

Seminole, Florida 33772  
(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.*

CHRISTOPHER LYON

(If Changing Registered Agent, Signature of New Registered Agent)

Christopher Lyon



4/21/11

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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	STREBEL, JONATHAN	11515 84TH AVE. N. SEMINOLE FL 33772	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

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

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Dated 4/15/2011, 2011



Signature of a member or authorized representative of a member

STREBEL, JONATHAN

Typed or printed name of signee