

# **2013 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L11000053073

**FILED**  
**Oct 09, 2013**  
**Secretary of State**

**Entity Name:** AMARO CUBA TRAVEL IMMIGRATION SERVICES, LLC

**Current Principal Place of Business:**

17218 TOLEDO BLADE BLVD  
11  
PORT CHARLOTTE, FL 33954

**New Principal Place of Business:**

3129 TAMIAMI TRAIL  
D-1  
PORT CHARLOTTE, FL 33952 US

**Current Mailing Address:**

17218 TOLEDO BLADE BLVD  
11  
PORT CHARLOTTE, FL 33954

**New Mailing Address:**

3129 TAMIAMI TRAIL  
D-1  
PORT CHARLOTTE, FL 33952 US

**FEI Number:** 26-4797004

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

AMARO, CINDY  
17218 TOLEDO BLADE BLVD  
11  
PORT CHARLOTTE, FL 33954 US

**Name and Address of New Registered Agent:**

ECHEVARRIA, LUMEY  
3129 TAMIAMI TRAIL  
D-1  
PORT CHARLOTTE, FL 33952 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: LUMEY ECHEVARRIA

10/09/2013

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: ECHEVARRIA, LUMEY  
Address: 3129 TAMIAMI TRAIL D-1  
City-St-Zip: PORT CHARLOTTE, FL 33952 US

Title: MGR  
Name: AMARO, CINDY  
Address: 3129 TAMIAMI TRAIL D-1  
City-St-Zip: PORT CHARLOTTE, FL 33952 US

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: LUMEY ECHEVARRIA

MGR

10/09/2013

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date