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14 JUN 20 11 01 20
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COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: JOANIA TOURS 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:

Tania Josefina Michinel

Name of Person

Joania Tours LLC

Firm/Company

5650 International Dr.

Address

Orlando, FL 32819

City/State and Zip Code

ventas@joaniatours.net

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

For further information concerning this matter, please call:

Tania Michinel

Name of Person

at **407 2591419**

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

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager
 AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	Leni Michinel	5650 International Dr.	<input checked="" type="checkbox"/> Add
		Olando, FL. 32819	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

I Tania Michinel as manager of Joania Tours LLC, I am

declaring that the shares will be modify as follows:

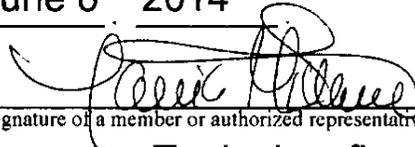
Tania Michinel 70% majority shareholder

Leni Michinel: 30% of minority shareholders

E. Effective date, if other than the date of filing: _____ (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated June 6 2014



Signature of a member or authorized representative of a member

Tania Josefina Michinel

Typed or printed name of signee

FILED
JUN 10 2014
CORPORATION
STATE OF FLORIDA