## L13000145274

(Re	equestor's Name)	
(Ad	ldress)	
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6-23-14

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SECRETARY OF STATE?

JUN 2 0 2014 T. BROWN

## **COVER LETTER**

TO: Registration Section
Division of Corporations

SUBJECT: 365 Travel Group, 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:

Carlos Agualimpia

Name of Person

365 Travel Group, LLC

Firm/Company

687 Woodcrest Road

Address

Key Biscayne, FL, 33149

City/State and Zip Code

carlos@365-travelgroup.com

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

For further information concerning this matter, please call:

Carlos Agualimpia

,,786,,303-5131

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)

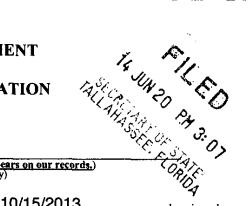
**MAILING ADDRESS:** 

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



365 Travel Group, 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 10/13/2013	and assigned
Florida document number L13000145274		
This amendment is submitted to amend the following:		EFFECTIVE DATE
A. If amending name, enter the new name of the limited liab	ility company here:	6-23-14
The new name must be distinguishable and end with the words "Limited Liab	oility Company," the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	687 Woodcrest Road	
(Principal office address MUST BE A STREET ADDRESS)	Key Biscayne, FL, 3314	9
Enter new mailing address, if applicable:	687 Woodcrest Road	
(Mailing address MAY BE A POST OFFICE BOX)	Key Biscayne, FL, 3314	9
B. If amending the registered agent and/or registered or registered office address her	ffice address on our records, <u>er</u> <u>e</u> :	nter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Florid	
	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 605, 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 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>	Address	Type of Action	
Misnaging Member	IMI, Inc.	741 Crandon Boulevard		
		Key Biscayne, FL	Remove	
		33149		
			Remove	
			D Add	
			□ Remove	
			Add	
			□ Remove	
			Add	
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	estment Group, LLC: 50%
Espres	so Worldwide, Inc.: 50%
(The enecuve date mus	other than the date of filing: June 23, 2014 (optional) t be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after t is filed by the Florida Department of State)
Dated June 1	2014
Carl	Signature of a member or authorized representative of a member OS Agualimpia

Page 3 of 3

Filing Fee: \$25.00