

L13000168840

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

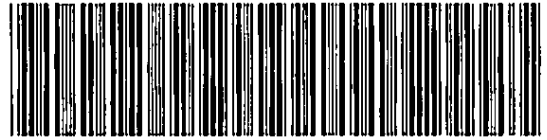
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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FILED
2022 JUN 28 PM 5:03
CLERK OF STATE
TALLAHASSEE, FL

Y SULKER

FEB 01 2022

X



RECEIVED

FLORIDA DEPARTMENT OF STATE
Division of Corporations

2022 JAN 28 AM 8:56
SECRETARY OF STATE
TALLAHASSEE, FL

January 10, 2022

NANCY R PARKER
1170 TREE SWAKKOW DR #358
WINTER SPRINGS, FL 32708

SUBJECT: PREFERRED TRAVEL PARTNERS LLC
Ref. Number: L13000168840

We have received your document for PREFERRED TRAVEL PARTNERS LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You cannot add managing member by filing RA change form

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Yasemin Y Sulker
Regulatory Specialist III

Letter Number: 122A00000707

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Preferred Travel Partners, 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:

Nancy R. Parker
Name of Person

Preferred Travel Partners
Firm/Company

1170 Tree Swallow Dr. #358
Address

Winter Springs FL 32708
City/State and Zip Code

nparker@preferredtravelpartners.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Nancy R. Parker at (239) 357-3373
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|--|--|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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

Preferred Travel Partners, 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 12/5/2013 and assigned
Florida document number L13000168840

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 contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

FILED
2013 JAN 28 PM 5:00
ARTICLE STATE
CLERK'S OFFICE
TALLAHASSEE, FL

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:

~~DAVEY PARKER~~ Christopher T. Parker

New Registered Office Address:

3112 Phoenix Ave.
Enter Florida street address


0165 mar
City

Florida

34677
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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person 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>
MGR	Nancy R. Parker	3112 Phoenix Ave.	<input type="checkbox"/> Add
		Oldsmar FL 34677	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
AMBR	Christopher T. Parker	3112 Phoenix Ave.	<input checked="" type="checkbox"/> Add
		Oldsmar FL 34677	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

[illegible]

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Signature of a member or authorized representative of a member

Christopher T. Parker
Typed or printed name of signee

Filing Fee: \$25.00