

L14000043645

(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



100303582291

09/25/17--01020--006 ♦\$25.00

FILED  
2017 SEP 25 PM 2:11  
STATE OF FLORIDA  
TALLAHASSEE, FL 32309

K SALY

SEP 27 2017

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Hard Exercise Works, 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:

Elisabeth B. Peters  
Name of Person

Firm/Company

10575 Arcole Ct.  
Address

Wellington, Florida 33449  
City/State and Zip Code

Zachandzane@comcast.net  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Elisabeth B. Peters at (561) 662-0095  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- |  |  |  |  |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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**

Hard Exercise Works, LLC

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

FILED  
2017 SEP 25 PM 2:12

CLERK OF STATE  
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 03/17/2014 and assigned  
Florida document number L14000043645

This amendment is submitted to amend the following:

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

Travelisa, LLC

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)**

10575 Arcole Court

Wellington, FL 33449

**Enter new mailing address, if applicable:**

**(Mailing address MAY BE A POST OFFICE BOX)**

10575 Arcole Court

Wellington, FL 33449

**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:

Elisabeth B. Peters

New Registered Office Address:

10575 Arcole Court

Enter Florida street address

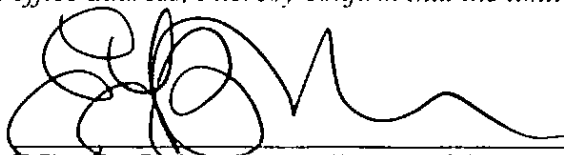
Wellington  
City

Florida

33449  
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**



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

FILED  
2015 SEP 25 PM 2:12  
CLERK OF DISTRICT COURT  
JULIA A. HARRIS, CLERK  
JULIA A. HARRIS, CLERK

**E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)**

(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)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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.

Dated September 19, 2017

Signature of a member or authorized representative

Elisabeth B. Peters

Typed or printed name of signee