

L14000094630

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

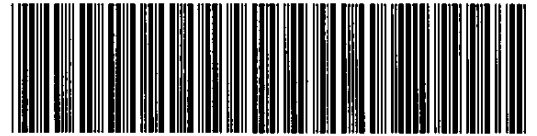
(Business Entity Name)

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J. HARRIS



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Suite 700
Minneapolis, MN 55435-5844

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F 952.885.5969
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Jean Swanson
jswanson@mmblawfirm.com
Direct 952.885.4391

July 8, 2014

VIA 2-DAY OVERNIGHT COURIER

Florida Department of Corporations
Registration Section
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Re: Articles of Amendment to Articles of Organization
Our File No.: 15180-5

Dear Sir or Madam:

Enclosed for filing please find Articles of Amendment to Articles of Organization of TravClickGo, LLC to change its name to TripClickGo, LLC. Also enclosed is a duplicate copy for purposes of the certified copy and a check in the amount of \$55 to cover the filing fee and certified copy fee. When the Amendment has been filed, please forward the acknowledgement of filing to my attention at:

Jean Swanson, Paralegal
Monroe Moxness Berg PA
7760 France Ave. S., Suite 700
Minneapolis, MN 55435
Phone: 952-885-5999

Do not hesitate to contact me if you have any questions.

Very truly yours,

MONROE MOXNESS BERG PA

Jean Swanson
Paralegal

Enclosures
MMB: 4814-7327-4140, v. 1

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: TravClickGo, 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:

Jean Swanson

Name of Person

Monroe Moxness Berg PA

Firm/Company

7760 France Ave. S., Suite 700

Address

Minneapolis, MN 55435

City/State and Zip Code

jswanson@mmblawfirm.com

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

For further information concerning this matter, please call:

Jean Swanson

Name of Person

952 885-5999

at (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

TravClickGo, 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 June 12, 2014 and assigned
Florida document number L14000094630.

This amendment is submitted to amend the following:

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

TripClickGo, LLC

The new name must be distinguishable and end with 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)

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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:

New Registered Office Address:

Enter Florida street address

_____, Florida _____
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>	<u>Address</u>	<u>Type of Action</u>
			☐ Add
			☐ Remove
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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

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 July 1, 2014



Signature of a member or authorized representative of a member

Tom Kruszewski, Authorized Representative of Member

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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