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Office Use Only



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COVER LETTER

Registration Section

Tallahassee, FL 32314

TO:

Division o	f Corporations			
	O TOURISM INTERNATIONAL	LLC		
SUBJECT:	Name of L	imited Liability Company		
The enclosed Articl	es of Amendment and fee(s) are s	ubmitted for filing.		
Please return all cor	respondence concerning this matt	er to the following:		
	Barbara H. Schreibman,	Esq.		
	 	Name of Person	· · · · · · · · · · · · · · · · · · ·	
	Barbara H. Schreibman,	Esq., Attorny-at-Law		
		Firm/Company		
	2645 Executive Park Dr	ive - Suite 150		
		Address		
	Weston, Florida 33331			
		City/State and Zip Code		
	barbara@schreibmanlaw.			
		s: (to be used for future annual report n	otification)	
	tion concerning this matter, please			
Barbara H. Schreib		954 389-1452 at ()		
N	ame of Person	Area Code Dayt	ime Telephone Number	
Enclosed is a check	for the following amount:			
□ \$25.00 Filing F	ee ☐ \$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 A	ddress: ion Section	Street Address: Registration S	Section	
	of Corporations	Division of C		
P.O. Box		The Centre of	Tallahassee	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MASO TOURISM INTERNATION	NAL LLC		
(Name of the Lim	ited Liability Company as it now (A Florida Limited Liability Co	appears on our records.) mpany)	
The Articles of Organization for this Limited Florida document number 1.14000155145	Liability Company were filed	f on October 6, 2014	and assigned
This amendment is submitted to amend the fo	llowing:		
A. If amending name, enter the new name	of the limited liability comp	oany here:	
The new name must be distinguishable and contain the	words "Limited Liability Compan	y," the designation "ELC" or th	e abbreviation "L.L.C."
Enter new principal offices address, if appl	cable:		
(Principal office address MUST BE A STRE	ET ADDRESS)		<u> </u>
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B. If amending the registered agent and/or agent and/or the new registered office address	registered office address o	n our records, <u>enter the n</u>	ame of the new registered
Name of New Registered Agent:	(Same)		
New Registered Office Address:	2645 Executive Park Drive	e - Suite 106 nter Florida street address	
			22221
	Weston	Florida	Zip Code
	CHY		villy Come

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>	Address	Type of Action
MGR	Richard John Calderoni, Sr	2645 Executive Park Drive	□Add
		Suite 106	□Remove
		Weston, Florida 33331	
MGR	Esteban Torbar	2645 Executive Park Drive	□Add
		Suite 106	_
		Weston, Florida 33331	■Change
MGR	Federico Serrano	2645 Executive Park Drive	
		Suite 106	2021 OCT 48 8 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
		Weston, Florida 33331	The Changes
MGR	Lara Torbar	2645 Executive Park Drive	10 175 10
		Suite 106	
		Weston, Florida 33331	
			□ Remove
			□Change
			□Add
			□Remove
			□Change

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Effective date, if other than th	e date of filir	ng:		(optional)	
I'an effective date is listed, the date monote: If the date inserted in this b	ist be specific ai flock does not	nd cannot be pric meet the annli	or to date of filing icable statutory	or more than 90 days filing requirements	s after filing.) Pursu s. this date will no	ant to 605.020 ot be listed a
document's effective date on the I	Department of	State's record	s.			
e record specifies a delayed effecti rd is filed.	ve date, but no	ot an effective	time, at 12:01 a	.m. on the earlier o	of: (b) The 90th	day after the
Dated September 24		2021				
7(7		·	ative of a member		
ابر <u>)</u>	< / - \d					

Filing Fee: \$25.00

Typed or printed name of signee