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## **COVER LETTER**

SUBJECT:	UNRAVEL	TRAVEL, LLC					
SCEGECT.		Name of Limit	ted Liability Company	·	<del></del> _		
The enclosed	Articles of Am	nendment and fee(s) are subm	nitted for filing.				
Please return	all corresponde	ence concerning this matter to	o the following:				
		Randy J. Nathan, Es	q				
			Name of Person	<u></u>			
		Frank, Weinberg & B	lack, P.L.				
			Firm/Company				
		7805 SW 6th Court					
			Address		<u></u>		
		Plantation, FL 33324					
			City/State and Zip Code		<del></del>		
	<u> </u>	rnathan@fwblaw.net			<u> </u>		
			be used for future annual r	eport notification)		2015	) 
For further in	formation conc	erning this matter, please cal	4		Ž		
Randy J.	Nathan, Esc	+ Kaullat	954 47	4-8000 x113	74.30		The Memo:
	Name of Pe	rson	Area Code	Daytime Telephor	ne Number		
						# 2: 4	
Enclosed is a	check for the f	ollowing amount:			<u>ई</u> छ	30000000000000000000000000000000000000	" Tau mo
□ \$25.00 F	iling Fee	\$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)		\$60.00 Filing For Certificate of S Certified Copy (additional copy is	Status &	

#### MAILING ADDRESS:

TO:

Registration Section
Division of Corporations

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

UNRAVEL TRAVEL, LLC				
( <u>Name of the Limited Liability Compan</u> (A Florida Limited Lia	y <u>as it now appears on our records.</u> ) ability Company)		_	
The Articles of Organization for this Limited Liability Company w	vere filed on 2/25/2015	and	assign	ned
Florida document number <u>L15000035253</u> .				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liabil	ity company here:			
KRC TRAVEL SOLUTIONS, LLC				
The new name must be distinguishable and end with the words "Limited Liabil	ity Company," the designation "LLC" or the	abbreviatio	n "L.L.	.C."
Enter new principal offices address, if applicable:				
(Principal office address MUST BE A STREET ADDRESS)				
			-8-3	
		三五年	35	(E.F.)1ew
Enter new mailing address, if applicable:		整體	至	
(Mailing address MAY BE A POST OFFICE BOX)		S	<u>:</u>	AND RESIDENCE
		A.	77	Andril.
		<u> </u>	1	Ebranari Ebranari
B. If amending the registered agent and/or registered offi		r the nar	ne <u>of</u>	
registered agent and/or the new registered office address here:		13 (-1	0	
Name of New Registered Agent:				
New Registered Office Address:	<u>.</u>			
	Enter Florida street address			
	, Florida			

### 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.

City

If Changing Registered Agent, Signature of New Registered Agent

Zip Code

If amending the Managers or Authorized Member on our records, <u>enter the title, name, and address of each Manager or Authorized Member being added or removed from our records</u>:

MGR = M $AMBR = A$	anager uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add
			Remove
			□ Add
			□ Remove
			Add
			Remove
			ALCADAD Remove Remove PH 2: 40
			083 2: <b>€</b> 0 Add
			☐ Remove
			Add
			□ Remove

. If amer	nding any other information, enter change(s) here: (Attach additional sheets,	if necessary.)
_		
_		
_		
(The effec	ve date, if other than the date of filing:  ctive date must be specific, cannot be prior to date of receipt or filed date and cannot be more than so this document is filed by the Florida Department of State)	(optional) 00 days after
Dated_	Land Julus	
	Signature of a member or authorized representative of a member RANDY J. NATHAN	
	Typed or printed name of signee	

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Filing Fee: \$25.00

