

Florida Department of State

Division of Corporations

Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : AMBAR DIAZ, P.A.
Account Number : I20110000016
Phone : (305)476-8100
Fax Number : (305)476-8788

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: pat.oceanside@gmail.com

2017 AUG 16 AM 09:23
TALLAHASSEE, FLORIDA

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
INTERNATIONAL BUSINESS & TRAVEL OPPORTUNITIES LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

2017 AUG 16 AM 09:07

SECOND AMENDMENT
TALLAHASSEE, FLORIDA

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AUG 17 2017

(((H17000217617 3)))

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: INTERNATIONAL BUSINESS & TRAVEL OPPORTUNITIES 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:

WILLIAM P MURPHY

Name of Person

INTERNATIONAL BUSINESS & TRAVEL OPPORTUNITIES LLC

Firm/Company

737 N Ocean Blvd PMB 137

Address

Lauderdale by the Sea, FL 33308

City/State and Zip Code

pat.oceanside@gmail.com

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

For further information concerning this matter, please call:

WILLIAM P MURPHY

at (954) 654-3786

Name of Person

Area Code

Daytime Telephone Number

RECEIVED
FLORIDA
AGENCY
TALLAHASSEE, FLORIDA

2017 AUG 16 A 10:23

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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)
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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

(((H17000217617 3)))

ARTICLES OF AMENDMENT (((H17000217617 3)))
TO
ARTICLES OF ORGANIZATION
OF

INTERNATIONAL BUSINESS & TRAVEL OPPORTUNITIES 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 04/22/2015 and assigned Florida document number L15000070886.

This amendment is submitted to amend the following:

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

NO CHANGES

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:

NO CHANGES

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

NO CHANGES

(Mailing address MAY BE A POST OFFICE BOX)

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:

NO CHANGES

New Registered Office Address:

NO CHANGES

Enter Florida street address

City

Florida

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>
AMBR	WILLIAM P MURPHY	4737 N. OCEAN BOULEVARD, PMB 137	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
		LAUDERDALE BY THE SEA, FL 33308	<input type="checkbox"/> Change
AMBR	CARLOS L DEL VALLE	1163 NE 88 ST. MIAMI FL 33138	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
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			<input type="checkbox"/> Change

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D. If amending any other information, enter change(s) here: *((H17000217617 3))*
(Attach additional sheets, if necessary.)

CARLOS DEL VALLE'S MEMBERSHIP IN THE COMPANY CEASED COMPLETELY AS OF

JANUARY 1ST, 2017. WILLIAM P. MURPHY BECAME THE SOLE MEMBER AND MANAGER

AS OF THE SAME DATE.

2017 AUG 16 A 10:23
ALLAHASSE, FLORIDA

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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 JUNE 14TH 2017

William P. Murphy
Signature of a member or authorized representative of a member

WILLIAM P. MURPHY

Typed or printed name of signee

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Filing Fee: \$25.00

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