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## COVER LETTER

Division of Corpo	rations
SUBJECT: <u>E</u>	ASY TRAVEL SERVICES Group LLC Name of Limited Liability Company
The enclosed Articles of Ar	nendment and fee(s) are submitted for filing.
Please return all correspond	ence concerning this matter to the following:
	Yasna 5 Corner Roman Name of Person
	7731 NW 114th Pl. Address
	DOT 9/ Fl. 33/78  City/State and Zip Code
	HASNA. CORNED CEASCITACE MIAMI. COM E-mail address: (to be used for tuture annual report notification)
For further information con- 49500 Name of P	S (ORne) Ronan 305- 609-4577  Area Code Daytime Telephone Number
Enclosed is a check for the	
□ \$25.00 Filing Fee	S30.00 Filing Fee & S55.00 Filing Fee & Certificate of Status & Certificate of Status & Certificate of Status & Certificate Copy (additional copy is enclosed)

MAILING ADDRESS:

TO:

Registration Section

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

(A Florida Limited L	SERVICES GROUP LLC  ny as it now appears on our records.  iability Company)
The Articles of Organization for this Limited Liability Company of Florida document number <u>L. 16000018536</u>	were filed on $01/29/2016$ and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabil	ility company here:
The new name must be distinguishable and contain the words "Limited Liabili Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	ity Company," the designation "LLC" or the abbreviation "LLC" $\frac{773}{M}$ $\frac{1141h}{M}$ $\frac{1141h}{M}$
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)  B. If amending the registered agent and/or registered off	
registered agent and/or the new registered office address here	
Name of New Registered Agent:	AUC
New Registered Office Address:	OF C
	Enter Florida street address
	, Florida
New Registered Agent's Signature, if changing Registered Agent:	747 <b>25</b> 70 <del>25</del> 70 <del>25</del> 70 <del>25</del>
I hereby accept the appointment as registered agent and agre provisions of all statutes relative to the proper and complete p accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office of company has been notified in writing of this change.	performance of my duties, and I am familiar with and provided for in Chapter 605, F.S. Or, if this document is

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
AMBR	ERIKA D DAZA	3930 Adra Av Doral, Fl. 33178	Add
		Doral, Fl. 33178	Remove
			Change
AMBR	YASNO S. CORNE	10 ROMAN 7731 NW 114	A. Add
	, and the second se	DOTAL, Fl. 33178	□ Remove
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Filing Fee: \$25.00