## L17000151662

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## **COVER LETTER**

TO:

Tallahassee, FL 32314

ΓΟ: Registration Se Division of Cor			,
21.110.112.6212	AVEL ASSIST LLC		. •
SUBJECT:	Name of Lim	ited Liability Company	- 18 ····
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	JORGE SCHNEIDER		
		Name of Person	<del></del>
	JFS CONSULTING SERV	ICES LLC	
		Firm/Company	
	2627 NE 203rd ST - SUIT	E 218	
	<del>.</del>	Address	
	AVENTURA, FL. 33180		
		City/State and Zip Code	
	jschneider@jfsconsultingsv		
	E-mail address: (	to be used for future annual report noti	fication)
For further information of	concerning this matter, please ca	all:	
JORGE SCHNEIDER		786 440-5553	
Name o	f Person	Area Code Daytim	e Telephone Number
Enclosed is a check for the	he 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 Addres Registration		<u>Street Address:</u> Registration Se	ction
Division of C	Corporations	Division of Cor	porations
P.O. Box 632	27	The Centre of 1	l'allahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

EASY TRAVEL ASSIST LLC

(1.2	(A Florida Limited Liability)	Company)	
The Articles of Organization for this Limited I Florida document number L17000151662	Jiability Company were fi	led on <u>07/14/2017</u>	and assigned
This amendment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name	of the limited liability co	mpany here:	
e-touchstone LLC			
The new name must be distinguishable and contain the	words "Limited Liability Com	pany," the designation "LLC" o	the abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:		
Principal office address MUST BE A STRE	ET ADDRESS)		
Enter new mailing address, if applicable:  "Mailing address MAY BE A POST OFFICE	E BOX)		
B. If amending the registered agent and/or agent and/or the new registered office addr		on our records, <u>enter th</u>	e name of the new regis
N	IFS CONSULTING SE	ERVICES, LLC	~
Name of New Registered Agent:	JFS CONSULTING SE		· · · · · · · · · · · · · · · · · · ·
Name of New Registered Agent:  New Registered Office Address:	JFS CONSULTING SE 2627 NE 203rd, ST - S	uite 218	
	2627 NE 203rd. ST - S	uite 218  Enter Florida street address	1.2
	<del></del>	uite 218  Enter Florida street address Flori	$da \frac{33180}{Zip Code} \xrightarrow{CO}$

## 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
			□Add
			□Remove
			☐ Change
			□Add
		<del></del>	
			□Change
			□Add
			□Remove
			□Change
			□Add
		□Remove	
		-	□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□ Change

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, I Pursuant to 605.020  Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as document's effective date on the Department of State's records.  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 ord is filed.  Dated  Signification of a member or authorized epresentative of a member.	-	
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Filing Fee: \$25.00