U17000207988

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COVER LETTER

TO: Registration Sec Division of Corp			
Apex Travel SUBJECT:	& Tours LLC.		
SUBJECT:	Name of Limi	ited Liability Company	
The enclosed Articles of A	Amendment and fee(s) are sub-	mitted for filing.	en _a dy e
Please return all correspon	ndence concerning this matter	to the following:	
	Xinyu Wang		
		Name of Person	· .
		l'irm/Company	
	8422 SW 163 Terrace		
		Address	
2 2	Palmetto Bay, FL 33157	. *.	
	wxinyu@yahoo.com	City/State and Zip Code	
	E-mail address: (1	to be used for future annual report noti	fication)
For further information co	ncerning this matter, please ca	all:	
Xinyu Wang		305 610-5308	
Name of	Person · · ·	Area Code Daytim	e Telephone Number
Enclosed is a check for the	e 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 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

ARTICLES OF AMENDMENT TO **ARTICLES OF ORGANIZATION**

Apex Travel & Tours LLC.	
(Name of the Limited Liability Company as it now appears of (A Florida Limited Liability Company)	on our records.)
The Articles of Organization for this Limited Liability Company were filed on 10/09	2/2017 and assigned
Florida document number L17000207988	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability company here	;
Apex Travel & Tours LLC	
The new name must be distinguishable and contain the words "Limited Liability Company," the desi	
Enter new principal offices address, if applicable:	· ACI
(Principal office address MUST BE A STREET ADDRESS)	C creman
	63 6
	me no the
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	22.5. <u>9</u>
	ţ>
B. If amending the registered agent and/or registered office address on or registered agent and/or the new registered office address here: Name of New Registered Agent:	our records, enter the name of the ne
Name of New Registered Agent.	
New Registered Office Address: Enter Florida	a street address
	, Florida
City	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 = Ms $AMBR = As$	anager uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
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			□ Remove
			□ Change
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Filing Fee: \$25.00