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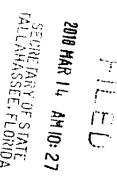
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COVER LETTER

TO: Registration Sec Division of Corp					
	Travel LLC				
SUBJECT:Name of Limited Liability Company					
The enclosed Articles of a	Amendment and fee(s) are sub	mitted for filing.			
Please return all correspo	ndence concerning this matter	to the following:			
	Elias Zakaria				
		Name of Person			
	Ok Mundo Travel LLC				
		Firm/Company			
	7951 NW 107th CΓ				
	-	Address	(4)		
	Doral, FL 33178				
	info@okmundotravel.com	City/State and Zip Code			
		to be used for future annual report notifi	ication)		
For further information co	oncerning this matter, please of	all:			
Elias Zakaria		786 6364810			
Name of	Person	at () Area Code Daytime	Telephone Number		
Enclosed is a check for th	e following amount:				
■ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55,00 Filing Fee & Certified Copy radditional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy tadditional 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 Clitton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

OK MUNDO TRAVELLLC (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 $\frac{10/12/2017}{2}$ and assigned L17000211701 Florida document number This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (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: New Registered Office Address: Enter Florida street address 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
MGR	Carlos Fernandez	2641 Oakbrook Lane,	
		Weston, FL 33332	≅ Remove
			Change
MGR	Corporacion S&E, C.A	Calle Trujillo, C.C. Rimini,	_
		Local P3, Ciudad Ojeda, Zulia,	Прэмэн
		Venezuela, 4019	☐ Change
			☐ Remove
		☐ Change	
			□ Add
			□ Remove
			☐ Change
			□ Remove
			☐ Change
			□ Remove
			☐ Change

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Effective date, if other than the offective date is listed, the date minutes. If the date inserted in this bedocument's effective date on the light	ust be specific as block does not	nd cannot be p meet the app	nor to date of t	ling or more than S ory filing require	(optional) O days after filing ments, this date	.) Pursuant	L10 605,0)2(d a
ne record specifies a delaye The 90th day after the re			not an effe	ective time, at	: 12:01 a.m.	on the	earliei	r o
		2018						

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00