

L18000053145

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

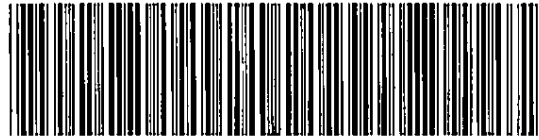
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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05/09/19--01021--005 **25.00

2019 MAY 9 PM 4:28

FILED

Amend
Name chg

MAY 20 2019
I ALBRITTON

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Experience Luxury Travels
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:

Phoniese Slaton
Name of Person

Firm/Company

3495 NW 11ct
Address

Miami FL 33127
City/State and Zip Code

phyeesa@yahoo.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Phoniese Slaton at (305) 815-3083
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the 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

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations

Experience Luxury Travels

The Articles of Organization for this Limited Liability Company were filed on 2/28/18 and assigned Florida document number L18000053145

Travel With Phyeesa LLC

Page 1 of 3

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	Phoniese Slaton	3495 NW 11 Ct.	<input checked="" type="checkbox"/> Add
		Miami, FL 33127	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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[illegible]

(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)

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.

May 7 2019

Phonetic Notation

Signature of a member or authorized representative of a member

Phoniese Slaton

Typed or printed name of signee