## 118000204 (de2

(Re	equestor's Name)	
(Ac	idress)	
(Ad	idress)	
(Ci	ty/State/Zip/Phone	: #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

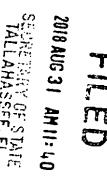
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## **COVER LETTER**

TO: Registration Section of Corp	orations		.•
SUBJECT: 5	HORE Excue	SIONS GALORE,	LLC
	Name of Limi	ited Liability Company	
The enclosed Articles of A	mendment and fee(s) are sub-	mitted for filing.	
Please return all correspon	dence concerning this matter	to the following:	
	HARKAUR BOBBIE HE!	MRAJ	
		Name of Person	
	SHORE EXCU	ERSIONS GALORE, L	LC
		Firm/Company	
	801 NW 79th TERRACE		
	*** -	Address	
	PLANTATION, FL 33324		
	<u> </u>	City/State and Zip Code	
	hbhemraj@yahoo.com		
	E-mail address; (	to be used for future annual report not	ification)
For further information co	ncerning this matter, please co	all:	
HARKAUR BOBBIE HE	MRAJ	305 495-2332	
Name of	Person	at () Area Code Daytin	ne 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 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

FILED

2018 AUG 31 AM 11: 40

SHORE EXCURSIONS GALORE, LLC

company has been notified in writing of this change.

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

SECRETARY OF STATE
TALLAHASSEE. FL

The Articles of Organization for this Limited Liability (	Company were	tiled on 08/27	/2018	and assigned
Florida document number <u>L 18000204662</u>				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the lin	nited liability	company here	:	
EXCURSIONS AND TOURS GALORE, LLC				
The new name must be distinguishable and contain the words "Lii	mited Liability Co	impany," the desig	gnation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:				
(Principal office address MUST BE A STREET ADD	RESS)			<u></u>
Enter new mailing address, if applicable:	<del></del>		, <u>.</u>	-
(Mailing address MAY BE A POST OFFICE BOX)				
	<del></del>			
B. If amending the registered agent and/or registered agent and/or the new registered office ade		address on o	ur records, <u>ente</u>	er the name of the new
registered agent and/or the new registered office and	uress nere.			
Name of New Registered Agent:				
New Registered Office Address:		Futar Florida	street address	
		Tity	Florida _	Zip Code
New Registered Agent's Signature, if changing Registere				
				1 11 1
I hereby accept the appointment as registered agent provisions of all statutes relative to the proper and c				
accept the obligations of my position as registered c	agent as provi	ded for in Cha	ipter 605, F.S. O	r, if this document is
being filed to merely reflect a change in the register	red office addi	ess, I hereby (	confirm that the i	limited liability

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>	Name	Address	Type of Action
			Remove
			Change
	<del> </del>		Add
			Remove
			Change
			Add
			Remove
			☐ Change
			Remove
			Change
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Note:	ive date, if other than the date of filing:
	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: 90th day after the record is filed.
Dated	29th August 2018. Hensaj
	Signature of a member or authorized representative of a member
	HARKAUR BUBBIE HEMRAJ
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00