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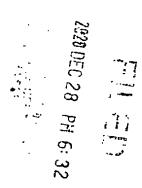




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FEB () 8 2021 S. YOUNG



COVER LETTER

Registration Section Division of Corporations

ľO:

SUBJECT:	TOUR LINE	NETWORK USA, LLC		
JUDIECI:	Name of Lim	ited Liability Company		
The enclosed Articles	of Amendment and fee(s) are sub	omitted for filing.		
Please return all corres	pondence concerning this matter	to the following:		
		JADERLIS PORTELA		
		Name of Person		
		TOUR LINE NETWORK		
		Firm/Company		
		6262 SW 40 ST Suite 3K		
		Address		
		MIAMI, FL 33155		
		City/State and Zip Code		
	_	estoriacountryclub@outlook.c		
	E-mail address: (to be used for future annual repo	ort notification)	
For further information	n concerning this matter, please c	all:		
Melodi	Hernandez	786 at ()	538-0048	
Nam	e of Person	Area Code E	Daytime Telephone	e Number
Enclosed is a check fo	r the following amount:			
■ \$25,00 Filing Fee	☐ \$30,00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed	1)	60,00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
P.O. Box 6	n Section Corporations	The Centro 2415 N. M		ee

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

TOUR	R LINE NETWORK USA, LLC		2
(<u>Name of the Limited</u> (/	Liability Company as it now appear Visited Liability Company)	's on our records.)	7.29
he Articles of Organization for this Limited Lial lorida document number	bility Company were filed on	11/23/2020	and Passigned Phil
his amendment is submitted to amend the follow			3 2
. If amending name, enter the new name of t	he limited liability company he	<u>:re</u> :	
ne new name must be distinguishable and contain the wor	rds "Limited Liability Company," the d	esignation "LLC" or t	he abbreviation "L.L.C."
nter new principal offices address, if applical	ble:		
Principal office address MUST BE A STREET	ADDRESS)		
nter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE B 3. If amending the registered agent and/or regent and/or the new registered office address Name of New Registered Agent: New Registered Office Address:	gistered office address on our re	ecords, enter the	name of the new registers
	Enter Flor	rida street address	
	City	, Florida	a
ew Registered Agent's Signature, if changing Re	·		гр Сме
hereby accept the appointment as registered rovisions of all statutes relative to the proper cept the obligations of my position as regist eing filed to merely reflect a change in the reompany has been notified in writing of this ca	r and complete performance of ered agent as provided for in (egistered office address, I herel	^r my duties, and L Chapter 605, F.S.	am familiar with and Or, if this document is
	If Changing Registered Ag	gent, Signature of New	w Registered Agent

f amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added r removed from our records:

1GR = Manager

MBR = Authorized Member

<u> itle</u>	<u>Name</u>	Address	Type of Action
MANAG	JADERLIS PORTELA	6262 SW 40 ST SUITE 3K	■Add
		MIAMI, FL 33155	□Remove
		6262 SW 40ST	_
MANAG	YADERLIS PORTELA	MIAMI, FL 33155	
			□Change
<u>_</u>			□ Add
			Remove
			☐ Change
			□Add
			□Remove
			□Change
			□Add
			□ Remove
			□ Change
			□Add
			Remove

JADERLIS PORTELA	
JADERLIS PORTELA	
<u>.</u>	•
	
	
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cable statutory filing requirements.	optional) after filing.) Pursuant to 605.02 , this date will not be listed
time, at 12:01 a.m. on the earlier o	f: (b) The 90th day after th
Poltela	
pli ord ve	prior to date of filing or more than 90 days plicable statutory filing requirements ords. Tolde a large at 12:01 a.m. on the earlier of the control of the

Filing Fee: \$25.00