## 421000087804

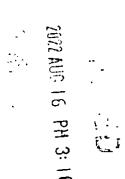
(Requestor's Name)
(Address)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
(Execument Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
apasiar manastana ta 1 mmg amaan

Office Use Only



100392406181

08/19/22--01913--001 \*\*30.00



Chr. 1/20

## **COVER LETTER**

TO: Registration S Division of Co					
	NCIA DE VIAJES LLC	.•	<b>37</b> *		
SUBJECT:	Name of Lin	nited Liability Company	<u></u> ,		
The enclosed Articles o	f Amendment and fee(s) are sub	omitted for filing.			
	oondence concerning this matter	_			
	MARIELYS BRAVO				
		Name of Person			
	261 AGENCIA DE VIAJI	ES LLC			
		Firm/Company	<del></del>		
	8421 S ORANGE BLOSS	SOM TRAIL 205			
		Address			
	ORLANDO, FLORIDA, I	32809			
		City/State and Zip Code	* ***		
	261AGENCIADEVIAJESI	•			
	E-mail address; (	to be used for future annual report n	otification)		
For further information	concerning this matter, please c	all:			
MARIELYS BRAVO		407 3359397 at ( )			
Name	of Person		ime 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 Addre Registration	Section	Street Address: Registration S			
Division of Corporations			Division of Corporations The Centre of Tallahassee		
P.O. Box 63 Tallahassee.			roe Street, Suite 810		

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

261 AGENCIA DE VIAJES LLC

(Name of the Limited Liability Compar (A Florida Limited L	ay as it now appears on our recor	<u>rds.) ; 8</u>
(A Fiorida Limited L	парину Сотрапу)	
The Articles of Organization for this Limited Liability Company	were filed on 02/22/2021	rds.) 22 All God assigned
Florida document number L21000087804		σ.
This amendment is submitted to amend the following:		PH w
A. If amending name, enter the new name of the limited liabi	lity company here:	- 10
MBJB GENERAL SERVICES LLC		
The new name must be distinguishable and contain the words "Limited Liabili	ty Company," the designation "LL	C" or the abbreviation "L.L.C."
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 a agent and/or the new registered office address here:	ddress on our records, <u>ente</u>	r the name of the new registere
Name of New Registered Agent:		
Nim. Book and Office Address.		
New Registered Office Address:	Enter Florida street addre	ess
		_
	, <b>F</b>	Florida Zip Code
Now Dogistand America Company of the state Dogistance & America	~···	Top some
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, <u>enter the title, name, and address of each person</u> <u>being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
			□Add
			□Remove
			□Change
			□Remove
			□Change
			\_Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Remove
			□Change
			□Remove
			□ Change

			_
			_
			_
	<del></del>		_
			_
	•	20	
		75	_
	——————————————————————————————————————	AUS	
		9	
			<del></del>
		ᇤ	:=:j
		=	
		<del></del> -	
			<del></del>
			_
Note:	ive date, if other than the date of filing:	suant to t not be l	505.0207 isted as
e reco rd is f	rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90 led.	th day a	fter the
	AUGUST 5TH 2022		
Dated			
Dated	Non-		
Dated	Signature of a member or authorized representative of a member		

Filing Fee: \$25.00