## L21000353533





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## **COVER LETTER** -

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f Amendment and fee(s) are sub		
	mitted for filing.	
ondence concerning this matter		
Č	to the following:	
Kristine	Bloedporn	
	Name of Person	
	Firm/Company	
3835 W	inona Dz.	
Pensacol	a, FL 32504	
Krise Fran E-mail address:	City State and Zip Code  (eland Save in fo  to be used for future annual report notific	cation)
Bloedoorn of Person	at ( <u>770</u> ) <u>789-</u> Area Code Daytime	1929 Telephone Number
the following amount:		
\$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)
	2835 W  Pensaco C  Kris e France  E-mail address: 6  concerning this matter, please concerning this matter concerning this matter concerning this matter concerning this matter concerning the concerning this matter concerning the concerning this matter concerning this matter concerning the concerning the concerning this matter concerning the concer	Address  Pensaw (a, FL 32504  City'State and Zip Code  Kris e travel and save info  E-mail address: (to be used for future annual report notific  concerning this matter, please call:  Bloedown at (770) 789-  of Person Area Code Daytime  the following amount:  X \$30.00 Filing Fee & Certified Copy

Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassec, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Kame of the Limited Liability Comp. (A Florida Limited)	ans as it now appears on our records.;	
The Articles of Organization for this Limited Liability Company Florida document number <u>£21000353533</u>	were filed on $8/5/2021$	and assigned
This amendment is submitted to amend the following:		
1. If amending name, enter the new name of the limited liab Travel and Save LLC The new name must be distinguishable and contain the words "Limited Liab		
The new name must be distinguishable and contain the words "Limited Liab		
Enter new principal offices address, if applicable:	3835 Winona DR. Pensacola, FL 32504	
Principal office address MUST BE A STREET ADDRESS)	Pensacola, LL 32504	
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)	3835 Winona Dr. Pensacula, FL 32509	<i>y</i>
B. If amending the registered agent and/or registered office	ttth. nom	a al'tha naurunistaras
B. If amending the registered agent and/or registered office igent and/or the new registered office address here:	address on our records, enter the nam	= or the new register co
		?
Name of New Registered Agent:		
New Registered Office Address:		·
	Enter Florida street address	~ · · · · ·
	, Florida	Zin Code
	Ziù	zapr Cirate

## 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 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

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<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
			□Remove
		□ Change	
			□Add
		□Remove	
		□Change	
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			□Remove
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	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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(If an effi Note:	ve date, if other than the date of filing:
the record ford is fil	a specifies a delayed effective date, but not an effective time, at (2:0) a.m. on the earner of (b). The 90th day after the ed.
Dated <sub>.</sub>	
	Justina Signature of a member or authorized representative of a member
	Typed or printed name of signee