Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

Fax Number : (850)617-6383

From:

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN KING TRAVEL CUBA LLC

| Certificate of Status | U |
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Electronic Filing Menu Corporate Filing Menu

Help

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

KING TRAVEL CUBA LLC

Page: 3 of 5

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

| (A) Ionida abinita ak | | 5 9.95 |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------|------------------------------------------------|
| The Articles of Organization for this Limited Liability Company | were filed on 12/07/2021 | and assign |
| Florida document number L21000516974 | | 6 |
| | | |
| This amendment is submitted to amend the following: | | |
| A. If amending name, enter the new name of the limited liabil | lity company here: | |
| KING' MULTISERVICES TRAVEL LLC | | |
| The new name must be distinguishable and contain the words "Limited Liability | ty Company," the designation "LLC" or the | abbreviation "L.L.C." |
| Enter new principal offices address, if applicable: | | |
| (Principal office address MUST BE A STREET ADDRESS) | | |
| Trincipal office dataress in OST in A STREET, ADDRESS | | |
| | | |
| Enter new mailing address, if applicable: | | |
| (Mailing address MAY BE A POST OFFICE BOX) | | _ |
| (Mailing address MAT BE AT UST OFFICE BOA) | | |
| | | |
| B. If amending the registered agent and/or registered office a | ddress on our records, enter the n | ame of the new registered |
| agent and/or the new registered office address here: | | |
| | | |
| Name of New Registered Agent: | | |
| New Registered Office Address: | | |
| | Enter Florida street address | |
| | , Florida | |
| | City | Zip Code |
| New Registered Agent's Signature, if changing Registered Agent: | | |
| New Registered rigent y digital and of it changing registered rigent | | |
| I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete paccept the obligations of my position as registered agent as pheing filed to merely reflect a change in the registered office company has been notified in writing of this change. | performance of my duties, and I a rovided for in Chapter 605. F.S. (| m familiar with and Or, if this document is |

If Changing Registered Agent, Signature of New Registered Agent

To: +18506176383

Page: 4 of 5

2021-12-15 19:01:47 GMT

13053284774

From: Yanet Avila

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 = M $AMBR = A$ | anager uthorized Member | | |
|--------------------|----------------------------|-------------|---------------------------|
| <u>Title</u> | <u>Name</u> | Address | Type of Action |
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| fective date, if other than the meffective date is listed, the date mu ote: If the date inserted in this b cument's effective date on the D | lock does not | t meet the applica | ible statutory iii | (opti more than 90 days after ling requirements, thi | innal) r filing.) Pursuant to 605.0 is date will not be listed | 207 (3 as th |
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| ecord specifies a delayed effecti- is filed. | ve date, but n | ot an effective ti | me, at 12:01 a.m | n, on the earlier of: (I | b) The 90th day after t | he |
| 12/14 ated | | 2021 | | | | |
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