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COVER LETTER

Registration Section Division of Corporations

TO:

SUBJECT: ETA En Vie	sion Travel Advisors LLC
	Name of Limited Liability Company
The enclosed Articles of Amendment a	nd fee(s) are submitted for filing.
Please return all correspondence conce	ming this matter to the following:
ETA Envision Travel Advisors LLC Firm/Company 7201 River LOOD Blod. Address Tampa, Florida 33615 City/State and Zip Code Envision travel advisors@gmail. Com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Kimberly Ingram at (813), 944-0059 Name of Person Area Code Daytime Telephone Number	
ETA	Envision Travel Advisors LLC Firm/Company
720	
en	Tampa, Florida 33615 City/State and Zip Code envision travel advisors@amail.com E-mail address: (to be used for future annual report notification) erning this matter, please call: gram at (813), 944-0059 Area Code Daytime Telephone Number Dillowing amount: 3 \$30.00 Filing Fee & S55.00 Filing Fee & S60.00 Filing Fee, Certificate of Status & Certificate Copy Certificate of Status
For further information concerning this	matter, please call:
Kimberly Ingram Name of Person	at (813), 944-0059 Area Code Daytime Telephone Number
Enclosed is a check for the following a	mount:
	cate of Status Certified Copy Certificate of Status &
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 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

2022 MAY 18 AM 11: 58

ETA C Tail	duing a 1 t A	200 IN 10 WUII - 20
ETA Envision Travel A (Name of the Limited Liability Comp (A Florida Limited	any as it now appears on our records.) Liability Company)	SECRETARY OF STATE TALLAHASSEE, FL
The Articles of Organization for this Limited Liability Company Florida document number $\frac{L2200035058}{}$.	y were filed on January 18, 2	0.22 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	bility company here:	
The new name must be distinguishable and contain the words "Limited Liab	ility 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)		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, enter the	name of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Florid	la
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent	<u>:</u>	

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

<u>Title</u>	<u>Name</u>	Address	Type of Action
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an 90 days after	filing.) Pursua		
e earlier of: (b)) The 90th (day afte	er the
	an 90 days after uirements, this	an 90 days after filing.) Pursua airements, this date will no e carlier of: (b) The 90th o	(optional) an 90 days after filing.) Pursuant to 60 direments, this date will not be list earlier of: (b) The 90th day after