KZ2000201268

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2022 HOV 30 PH 2: 42 SECRETARY OF STATE

COVER LETTER

TO:

TO: Registration Se Division of Cor						
	ES MUNDIAL LLC					
Name of Limited Liability Company						
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.				
Please return all correspo	ondence concerning this matter	to the following:				
		Name of Person				
	VORAUS S&O LLC					
		Firm/Company				
	994 EAST OSCEALO PA					
		Address				
	KISSIMMEE, FL 34747			2		
	voraussyo@gmail.com	City/State and Zip Code	5E CRF TAL	022 NO		
Para Carolle and in Communications on	E-mail address: (to be used for future annual report not	fication)	2022 NOV 30 PH 2: 42		
			23.55 01.05	무		
ELSY C OLIVAR VILLEGAS		321 732-2022 at ()	٠ <u>٠٠</u>	2: -		
Name o	f Person	Area Code Daytin	e Telephone Number	7 N		
Enclosed is a check for the	ne following amount:					
S25.00 Filing Fee	S30,00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filir Certificate Certified C (additional co	of Status opy		
Mailing Address		Street Address:	ation.			
Registration Section Division of Corporations		Registration Section Division of Corporations				
P.O. Box 6327		The Centre of Tallahassee				
Tallahassee, FL 32314		2415 N. Monro	e Street, Suite 810	.)		

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

RED VIAJES MUNDIAL LLC		
(Name of the Limited Liability Compar (A Florida Limited L	ny as it now appears on our ry Jiability Company)	ecords.)
The Articles of Organization for this Limited Liability Company	were filed on 05/13/2022	and assigned
Florida document number 1.22000201268		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabil	ity 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)		2022 SEC
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		NOV 30 PH 2: 42 RETARY OF STATE LLAHASSEE, FILE
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>e</u>	nter the name of the new register
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street o	uldress
		_, Florida
	City	хір Сойс
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, 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>	<u>Address</u>	Type of Action
AMBR	JOHAN ALBERTO ROMERO AL	1420 CELEBRATION BLVD STE 200	🗆 Add
		KISSIMMEE, FL 34747	□Remove
			■ Change
			□Add
			□Remove
			□Change
			□Add
			🗆 Remove
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. If amendir	ng any other info	ormation, enter c	change(s) here	: (Attach addit	ional sheets, if n	ecessary.)	
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. Effective	date, if other the	in the date of fili are must be specific a	ing: and cannot be prior	to date of filing o	more than 90 days	ptional) after filing.) Pursuant to , this date will not be	5 605.0207 (3 History as th
Note If the	he date inserted in	this block does no the Department o	t meet me appro-	more amount,	nng requirements	, this date will not be	
the record specord is filed.	pecifies a delayed (ffective date, but r	not an effective t	ime, at 12:01 a.t	n, on the earlier o	of: (b) The 90th day	after the
	///33		201.7	i.			
Dated	11 / 20			 	10	ΛΙ	
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	_ 	Signature of	i a member of auti	orized representa		W Alvarz Alvarz	
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Filing Fee: \$25.00