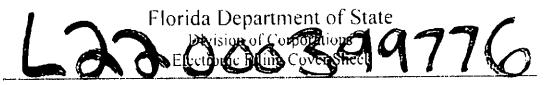
11/7/22, 4:08 PM

Division of Corporations



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H22000380986 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : RASCO KLOCK PEREZ & NIETO, P.L.

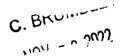
Account Number : 104076000124 : (305)476-7100

: (305)476-7102 Fax Number

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email	Address:	abazo@rascoklock.com
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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN VIAJO YA LLC



Certificate of Status	0
Certified Copy	0
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Corporate Filing Menu

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Registration Section

To:

TO:

COVER LETTER

Division of Corp	porations		
VIAJO YA	LLC		
SUBJECT:	Name of Limi	ted Liability Company	
The enclosed Articles of a	Amendment and fec(s) are sub-	mitted for filing.	
Please return all correspon	ndence concerning this matter	to the following.	
	ANDRES E BAZO		
		Name of Person	
	RASCO KLOCK PEREZ	& NIETO	
		Firm/Company	
	2555 PONCE DE LEON E	LVD SUITE 600	
		Address	
	CORAL GABLES FL 331	34	_
		City/State and Zip Code	
	ABAZO@RASCOKLOCK	.COM to be used for future annual report not	(faction)
			mcanon)
For further information c	oncerning this matter, please c	all:	
ANDRES BAZO		305 4767100 at ()	
Name o	f Person	Area Code Daytin	ne Telephone Number
Enclosed is a check for the	ne following amount:		
S25.00 Filing Fee	(1) \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addres Registration S		<u>Street Address:</u> Registration Se	ection
Division of C	-	Division of Co The Centre of	-
P.O. Box 632 Tallahassee, I			pe Street, Suite 810

Tallahassee, FL 32303

company has been notified in writing of this change.

To:

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

VIAJO YA LLC		\$ 3 3 3 3 3 3 3 3 3 3
(Name of the Limited Limbility (A Florida Li	Company as it now appears on our records imited Liability Company)	NASS T-7
The Articles of Organization for this Limited Liability Cor	npany were filed on	and an gned
Florida document number L22000399776		77/27
This amendment is submitted to amend the following:		^(*) \(\)
A. If amending name, enter the new name of the limite	ed liability company here:	
The new name must be distinguishable and contain the words "Limite	d Liability Company," the designation "LLC"	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	<u> </u>	
(Principal office address MUST BE A STREET ADDRE	<u> </u>	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	office address on our records, enter	the name 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	<u> </u>
	. Fle	orida
	City	Zip Code
New Registered Agent's Signature, if changing Registered	Agent:	
I hereby accept the appointment as registered agent an provisions of all statutes relative to the proper and con accept the obligations of my position as registered age being filed to merely reflect a change in the registered	mplete performance of my duties, an ent as provided for in Chapter 605, i	nd I am familiar with and F.S. Or, if this document is

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

To:

<u>Title</u>	Name	Address	Type of Action
MGR	SOFIA M QUINTERO LLANOS	2555 PONCE DE LEON BLVD SUITE 600	[] Add
		CORAL GABLES FL 33134	■ Remove
			Change
			Remove
			DChange
		<u></u>	□Add
			□Remove
			Change
			□ Add
			DRemove
			Change
**			
			□Remove
			□Change
			□ Add
			□Remove
			□Change

o:

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•	
Note:	tive date, if other than the date of filing:
rece d is i	and specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the filed.
Date.	11/07/2022
i)aict	Signature of amember or authorized representative of a member
	Signature of a premier or authorized representative of a member
	J. S.