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10:

Division of Corporations Fax Number : (850)617-6383

From:

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

Email	Address:



LLC AMND/RESTATE/CORRECT OR M/MG RESIGN FAMILY AND FRIENDS TRAVEL AND SERVICES LLC

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10/05/2023 16:16 3852201448 LAZARUS CORPORATE PAGE 02/04 ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF FAMILY AND FRIENDS TRAVEL AND SERVICES LLC (Name of the Limited Liability Company as it now appears on our records.) (A Plonde Limited Liability Company) $\overline{\chi}^{n}$ The Articles of Organization for this Limited Liability Company were filed on $\frac{2/24}{2023}$ and assigned Florida document number _____Z3000104776 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability 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 address on our records, enter the name of the new registered agent and/or the new registered office address here:

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Name of New Registered Agent:	,	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	
New Registered Office Address:	Enter Florida street address		
	. Flotida	1	
	City	Zip Code	
New Registered Agent's Signature, if changing Registered Agent:		· œ	

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.

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LAZARUS CORPORATE

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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>l'itle</u>	Name	Address	Type of Action
AMBR	ADRIAN FORNIAS LOPEZ	2350 NW BOTH St	🖸 Add
		MIAMI FL 33147	Re:nove
			Change
			🗆 Add
		<u></u>	🗆 Remove
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D. If amending any other information, enter change(s) here:	(Attach additional sheets, if necessary.)
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If the record 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 record is filed.

Dated OCTOBER 4 2023

Signature of a member or authorized representative of a member

ANDRES BARCA

Typed or printed name of signee