## L23000250651

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## COVER LETTER

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SUBJE	CT: T	RAVEL 24	7 LLC			
			Name of Limi	ited Liability Company		
The en	closed A	articles of A	mendment and fee(s) are sub	mitted for filing.		
Please	return al	l correspond	lence concerning this matter	to the following:		
			JUAN J FERNANDEZ GO			
				Name of Person  Firm/Company	diz	
			14250 SW 62TH ST APT	203 Address		<del></del>
			MIAMI, FL 33183			
			info@confidenttax.com	City/State and Zip Code		
			•	o be used for future annual:	report notification)	
For fur	ther info	rmation con	cerning this matter, please ca	ill:		
JUAN	J FERN	ANDEZ GO		at (786 ) 441	3 8289 Daytime Telepho	ana Yambar
		Name of r	erson	Mea Code	Баўніке тегерк	one evantoer
Enclose	ed is a cl	neck for the	following amount:			
<b>■</b> \$2:	5.00 Fili	ng Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enci		\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address: Registration Section Division of Corporations P.O. Box 6327

Street Address: Registration Section Division of Corporations The Centre of Tallahassee

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

TRAVEL 247 LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on  $\frac{05/22/2023}{2}$ Florida document number  $\underline{1.23000250651}$ 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: CONFIDENT TAX LLC Name of New Registered Agent: 420 SW 7th Street Suite 1019 New Registered Office Address: Enter Florida street address Miami

## 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.

Cin

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>	Address	<b>Type of Action</b>
President	JUAN J FERNANDEZ	Z GONZALEZ 14250 SW 62TH ST APT 203	□Add
		MIAMI, FL 33183 FL	Remove
			■Change
			□ Add
			□Remove
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If the record specification is filed.	fies a delayed effective o	late, but not a	n effective tin	ne, at 12:01 a.r	n. on the earlier o	f: (b) The 90th day	after the
Dated septem	iber 25	·	2023	·			
			an Fri	meide	7		
		enature of a mo	ember or author	rized representat	ive of a member		-

Typed or printed name of signee