3/20/24, 5:20 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

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Note: DO NOT hit the REFRESH RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations Fax Number : (850)617-6383 From: Account Name : LEGALZOOM.COM INC. Account Number : I28010800062

Phone : (323)952-8600 Fax Number : (323)389-0502

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

Email Address:__

فت فيقو بومند والمستدادة دلكن البرانيدية الشور فالمنت والراستين والمتدادة الشارات المستدار المستدارين



LLC AMND/RESTATE/CORRECT OR M/MG RESIGN M & S TRAVEL AND ENTERTAINMENT LLC

| Certificate of Status | () |
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| Certified Copy | 1 |
| Page Count | 06 |
| Estimated Charge | \$55,00 |

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To:

COVER LETTER

| TO: Registration Sec Division of Corp | | | |
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| | VEL AND ENTERTAINMEN | T LLC | |
| SUBJECT: | Name of Limit | ed Liabilny Company | |
| | | | |
| The enclosed Articles of | Amendment and fee(s) are subn | nined for filing | |
| Please return all correspo | ndence concerning this matter t | o the following: | |
| | Cheyenne Moseley | | |
| | | Name of Person | |
| | Legalzoom.com, Inc. | | |
| | | Finn/Company | |
| | 101 N Brand Blvd 11th Fl | | |
| | | Address | • |
| | Glendale, CA 91203 | | |
| | | City/State and Zip Code | · <u> </u> |
| | mct0321@gmail.com | o be used for future annual report n | otification) |
| For further information (| concerning this matter, please ca | | |
| | | | |
| Name (| of Person | 800 773-0888 at () | time Telephone Number |
| | | | |
| Enclosed is a check for t | he following amount: | | |
| □ \$25.00 Filing Fee | □ \$30.00 Filing Fee & Certificate of Status | 審\$55.00 Filling Fee & Certified Copy (siditional copy is end osed) | ☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (**addinounal copy is enclosed) |
| Regist Divisi P.O. I | JING ADDRESS: tration Section on of Corporations 30x 6327 tassee, FL 32314 | STREET/COU Registration So Division of Cor Clifton Buildin 2661 Executive | porations g |

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| M & S TRAVEL AND ENTERTAINMENT LLC | | | | |
|--|--|--|--|--|
| (Name of the Limited Liability Compan (A Florida Lumited I) | y as It now appears on our reen ability Company) | <u>rrds.)</u> | | |
| The Articles of Organization for this Limited Liability Company v | were filed on 01/22/2024 | and assigned | | |
| This amendment is submitted to amend the following: | | | | |
| A. If amending name, enter the new name of the limited liabil | ity company here: | | | |
| MS Travel LLC | | | | |
| MS Travel LLC The new name must be distinguishable and contain the words "Limited Liabile" | ty Company," the designation "f. | LC" or the abbreviation "L.I. C." | | |
| Enter new principal offices address, if applicable: | | | | |
| (Principal office address MUST BE A STREET ADDRESS) | | | | |
| | | | | |
| | | The HAR | | |
| Enter new mailing address, it applicable: | | ======================================= | | |
| (Mailing uddress MAY BE A POST OFFICE ROX) | | | | |
| ipituting data ess profit the AT 931 O. T.E. 2.1.1.2 | | | | |
| | | | | |
| B. If amending the registered agent and/or registered of | fice address on our reco | rds, enter the name of the new | | |
| registered agent and/or the new registered office address here | : | , ω | | |
| | | | | |
| Name of New Registered Agent: | | | | |
| New Registered Office Address: | | | | |
| New Registered of the Tradesia. | Enter Florida street ad | vet address | | |
| | | | | |
| - | Cay | Zip Code | | |
| New Registered Agent's Signature, if changing Registered Agent: | | | | |
| I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as a being filed to merely reflect a change in the registered office company has been notified in writing of this change. | performance of my duties provided for in Chapter 60 | , and I am familiar with and 15, F.S. Or, if this document is | | |

If Changing Registered Agent, Signature of New Registered Agent

MGR = Manager

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

| AMBR = Ai Title | athorized Member <u>Name</u> | <u>Address</u> | Type of Action |
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| ocument's effective | date on the Department of | State's records. | | | |
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| record specifie | es a delayed effective | date, but not ar | effective time, | at 12:01 a.m. on | the earlier |
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Page 3 of 3

Filing Fee: \$25.00