L24 000 201 218

(Requestor's Name)
(Address)
(Address)
(1.000)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
,
Contitued Consists
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
· ·

Office Use Only



800430462858

05.1514 -01984--002 **25.08



21 H

COVER LETTER

	egistration Sec vision of Corp			
SUBJECT:		TRAVEL LLC		
SUBJECT		Name of Limi	icd Liability Company	
The enclose	ed Articles of <i>i</i>	Amendment and fee(s) are subr	nitted for filing.	
Please retur	n all correspo	ndence concerning this matter t	to the following:	
		CARLOS A ORDONEZ		
			Name of Person	
		AZUCAR TRAVEL LLC		
	Firm/Company			
		9721 SW 152nd St apt 102	miami Fl 33157	
			Address	
		miami Fl 33157		
			City/State and Zip Code	
		Info@azucartravel.com		
		E-mail address; (t	to be used for future annual report noti	lication)
For further	information co	oncerning this matter, please ca	ıll:	
Carlos A (Ordonez		+1 7865416496 at ()	
	Name o	(Person	Area Code Daytim	e Telephone Number
Enclosed is	s a check for th	ne following amount:		
\$25.00) Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status &

Mailing Address:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

AZUCAR TRAVELLEC	
(Name of the Limited Liability Company as it now a (A Florida Limited Liability Comp	<u>opears on our records.</u>) any)
The Articles of Organization for this Limited Liability Company were filed of Torida document number <u>L24000201218</u>	n <u>04/30/2024</u> and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability compar	<u>ıy here</u> :
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:	, 2
Principal office address MUST BE A STREET ADDRESS)	三支
	7 2 Y 2
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Enter new mailing address, if applicable:	=
Mailing address MAY BE A POST OFFICE BOX)	<u> </u>
	3.
3. If amending the registered agent and/or registered office address on one usent and/or the new registered office address here: Name of New Registered Agent.	ur records, enter the name of the new regis
New Registered Office Address:	
	r Florida street address
	, Florida
City	Zip Code

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 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

Title	<u>Name</u>	Address	Type of Action
AMBR	CARLOS A ORDONEZ	9721 SW 152nd ST APTO 102 miami Fl 3157	■Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Remove
			□Change
		-	□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change

····					
				 	
					
					_
	<u></u>				
					
	· · · · · · · · · · · · · · · · · · ·			·	_
					
	·-				
					_
				···	_
ective date, if other than the d effective date is listed, the date must b	ate of filing:	prior to date of filing o	(0] r more than 90 days a	ptional) flor filing.) Pursuant to (505 020
te: If the date inserted in this bloc	k does not meet the ap	pplicable statutory fi	ling requirements,	this date will not be l	isted a
cument's effective date on the Dep	artment of State's rec	ords.			
		ive time, at 12:01 a.r	n, on the earlier of:	(b) The 90th day a	fter the
cord specifies a delayed effective of specifies and delayed effective of specifies.	date, but not an effecti				
cord specifies a delayed effective of sfled.	date, but not an effecti				
s filed.					
cord specifies a delayed effective of sfiled. May 16		·			
s filed.		·			
s filed. May 16 ed			ive of a member		

ET CARAG