L24000249693

(Re	questor's Name)	
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(Ad	dress)	
(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Na	me)
(Do	cument Number))
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	
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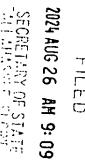
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Ret. 08/26/24



COVER LETTER

10: Registration Section Division of Corpora	tions	•				
SUBJECT:	Chasing	Sunsets	Trave	el lic	,	
30 00EC 1.	Name of Lim	ited Liability Company				
The enclosed Articles of Ame	endment and fee(s) are sub	mitted for filing.				
Please return all corresponder	nce concerning this matter	to the following:				
	Damai	ris Nuner	2			
_		Name of Person				
-		Firm/Company				
	13809 NW 22nd St					
-		Address	<u> </u>			
	Sunrise	FL 3332	3			
•	dee ke to gal a gnail. com					
_	E-mail address: (to be used for future annual	report notificat	ion)		
For further information conce		all:				
Damaris	Nuncz	at (954)	993 10	048		
Name of Per	son	Area Code	Daytime Te	lephone Number	•	
Enclosed is a check for the fo	llowing amount:					
□ \$25.00 Filing Fee □	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee of Certified Copy (additional copy is enc		□ \$60.00 Filing Fe Certificate of St Certified Copy (additional copy is e	atus &	
Mailing Address:		Street A				
Registration Section		Registration Section Division of Corporations				
Division of Corporations P.O. Box 6327			The Centre of Tallahassee			

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Chasing Sunsets Tr	ravel LLC
(Name of the Limited Liability Compan (A Florida Limited Li	
The Articles of Organization for this Limited Liability Company v	were filed on $5/31/2024$ and assigned
The Articles of Organization for this Limited Liability Company v	were fried oil and assigned
Florida document number <u>L24000249693</u>	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabil	
Chasing Sur	isets luxury travel, LLC
The new name must be distinguishable and contain the words "Limited Liabilit	ty 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)	SECRETA AUG
	6 F
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered office ac	ddress on our records, <u>enter the name of the new registers</u>
agent and/or the new registered office address here:	
Name of New Registered Agent:	
New Registered Office Address:	
	Enter 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	e to act in this canacity. I further garee to comply with the
provisions of all statutes relative to the proper and complete p	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 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>	<u>Address</u>	Type of Action
			□Remove
	`\		
			☐ Change
			-
			□Remove
			Change
			□Remove
			Bremove
			Change
			514.13
			□ Add
			□Remove
			5
			Change
			□Add
			□Remove
			□Add
			П етп оvе
			/ ⁻¹ /

Typed or printed name of signee