62400350486

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AUGUST 16, 2024

Hello, I am enclosing a copy my new entity from Sunbiz. There are several typos on the actual form, I did call to speak with someone but the articles have not been completed yet due to a backlog.

The town is Apollo Beach not Apollow as the form is showing

Also, it should be Ferren, Emily A not Ferren Emilyon

I also am enclosing the amendment since I did erroneously put the wrong registered agent name.

If you have any questions kindly reach out to me at 813-484-0648

Regards

Sandra Ferren.

COVER LETTER

TO: Registration So Division of Cor				
Salt Fun T	ravel LLC			
SUBJECT:	Name of Lin	nited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	omitted for tiling.		
Please return all correspo	ondence concerning this matter	to the following:		
	Sandra Ferren			
	Salt Fun Travel LLC			
		Firm/Company	e 1	
	1314 Apollo Beach Blvd	s	• 1	
		Address	· · ·	
	Apollo Beach FL 3357	2		
		City/State and Zip Code		
	E-mail address: ((to be used for future annual report notification)	r.1 U	
For further information c	oncerning this matter, please o	all:		
Sandra Ferren		813 484-0648 at ()		
Name o	f Person	at () Area Code Daytime Telephone :	Number	
Enclosed is a check for the	he following amount:			
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	Certified Copy Ce (additional copy is enclosed) Ce	0.00 Filing Fee, ertificate of Status & ertified Copy dditional copy is enclosed)	
Mailing Address		Street Address: Registration Section		
Registration Section Division of Corporations		Division of Corporations		
P.O. Box 6327		The Centre of Tallahassec	:	
Tallahassee, FL 32314		2415 N. Monroe Street, S	2415 N. Monroe Street, Suite 810	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Sait Fun Travel LLC		
(Name of the Limi	ted Liability Company as it now appea (A Florida Limited Liability Company)	rs on our records.)
The Articles of Organization for this Limited L. Florida document number 1.24000350486		7/2024 and assigned
This amendment is submitted to amend the foll	owing:	
A. If amending name, enter the new name of	f the limited liability company h	ere:
The new name must be distinguishable and contain the v	A walling at the little of the wall	ning with the skip and the skip
-		esignation and of the aboreviation fam.c.
Enter new principal offices address, if applic		
<u> Principal office address MUST BE A STREE</u>	<u>ST ADDRESS)</u>	
		<u> </u>
		: .
Enter new mailing address, if applicable:	- 	
Mailing address MAY BE A POST OFFICE	<u>BOX)</u>	<u> </u>
	-	
3. If amending the registered agent and/or ingent and/or the new registered office addre	-	ecords, <u>enter the name of the new regi</u>
Name of New Registered Agent:	Sandra Ferren	
New Registered Office Address:	1314 Apollo Beach Blvd S	
	Enter Floi	ida street address
	Apollo Beach	, Florida 33572
	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 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	Type of Action
MGR	Sandra Ferren	1314 Apollo Beach Blvd, S Apollo Beach FL 33572	■ Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			☐ Remove
		: :	 <u> </u>
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			Remove
			Changa

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. 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 _____ Signature of a member or aythorized representative of a member