

M16000008153

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

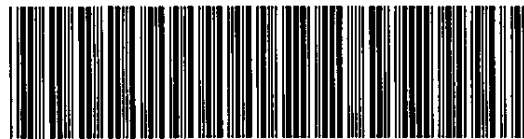
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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FILED
16 NOV 14 PM 9:22
CLERK OF CIRCUIT
JUDGE
TALLAHASSEE, FLORIDA

NOV 17 2016

Y SULKER

Gaston Blanchet
Marlon Travel LLC
600 NE 36th St PH26
Miami FL 33137
305-744-1261

Registration Section
Division of Corporations
FL Dept of State


To the Registration Section:

Please see enclosed our amendments to our Foreign Limited Liability Company's information (Document number: M16000008153), as well as our Delaware Certificate of Good Standing and a \$25 check.

In addition, we would like to request the removal of our rejected filing (document number W16000064520) from Sunbiz.org.

Thank you,

Gaston Blanchet



Owner
Marlon Travel LLC
305-744-1261

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Marlon Travel LLC

Name of Foreign Limited Liability Company

Dear Sir or Madam:

The enclosed application, certificate and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Gaston Blanchet

Name of Person

Marlon Travel LLC

Firm/Company

600 NE 36th St PH26

Address

Miami FL 33137

City/State and Zip Code

team@marlontravel.co

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jo Barnard

917 740-9387

at (_____) _____

Name of Person

Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

☒ \$25 Filing Fee

☐ \$30 Filing Fee &
Certificate of Status

☐ \$55 Filing Fee &
Certified Copy

☐ \$60 Filing Fee,
Certificate of Status &
Certified Copy

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE
AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT
BUSINESS IN FLORIDA**

SECTION I (1-4 must be completed)

1. Name of limited liability Company as it appears on the records of the Florida Department of

Marlon Travel LLC

State: _____

Enter new principal office 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)

2. The Florida document number of this limited liability company is: M16000008153

3. Jurisdiction of its organization: Delaware

4. Date authorized to do business in Florida: 10/12/2016 10/12/2016 10/12/2016

SECTION II (5-9 complete only the applicable changes)

5. New name of the limited liability company: _____
(must contain "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must contain "Limited Liability Company," "L.L.C." or "LLC.")

6. If amending the registered agent and/or registered officer address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent: Jo Barnard

New Registered Office Address: 600 NE 36th St PH 26

Enter Florida Street Address

Miami

City

Florida

33137

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


7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

8. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(e), indicate that change:

| <u>Title/ Capacity</u> | <u>Name</u> | <u>Address</u> | <u>Type of Action</u> |
|------------------------|-----------------|------------------------|--|
| Owner | Gaston Blanchet | 600N NE 36TH ST PH 26 | <input type="checkbox"/> Add |
| | | MIAMI, FL 33137 | <input checked="" type="checkbox"/> Remove |
| Owner | Jesse Potash | 22 HAIDE PL EAST ISLIP | <input type="checkbox"/> Add |
| | | NEW YORK, NY 11730 | <input checked="" type="checkbox"/> Remove |
| Director | Jo Barnard | 600N NE 36TH ST PH 26 | <input checked="" type="checkbox"/> Add |
| | | MIAMI, FL 33137 | <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Add |
| | | | <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Add |
| | | | <input type="checkbox"/> Remove |

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16 NOV 14 PM 5:33
CLERK OF CIRCUIT COURT
MIAMI, FLORIDA

9. Attached is a certificate, if required: no more than 90 days old, evidencing the
aforementioned amendment(s), duly authenticated by the official having custody of records in the
jurisdiction under the law of which this entity is organized.



Signature of the authorized representative

Jo Barnard

Typed or printed name of signee

Filing Fee: \$25.00

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "MARLON TRAVEL LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE THIRD DAY OF OCTOBER, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "MARLON TRAVEL LLC" WAS FORMED ON THE ELEVENTH DAY OF JULY, A.D. 2016.



6096126 8300

SR# 20165921011

You may verify this certificate online at corp.delaware.gov/authver.shtml

A handwritten signature in black ink, appearing to read "JBullock", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed in a small font.

Authentication: 203099730

Date: 10-03-16