(Re	questor's Name)	
(Add	dress)	
(Add	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu:	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies		
Special Instructions to	Filing Officer:	



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JUN 18 7071 I ALBROTTON

## CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

VIAJERO HOST	ELS-LLC-"		
	<del></del>		-    -
V1(1(C()	1-050		
		Prin	Art of Inc. File
<del></del>			LTD Partnership File
			Foreign Corp. File
			L.C. File
			Fictitious Name File
			Trade/Service Mark
			Merger File
			Art. of Amend. File
			RA Resignation
			Dissolution / Withdrawal
			Annual Report / Reinstatement
			Cert. Copy
			Photo Copy
			Certificate of Good Standing
			Certificate of Status
			Certificate of Fictitious Name
			Corp Record Search
			Officer Search
			Fictitious Search
Signature			Fictitious Owner Search
			Vehicle Search
	<del></del>		Driving Record
Requested by:			UCC 1 or 3 File
Name	Date	Time	UCC 11 Search
Hanne	Date	Time	UCC 11 Retrieval
Walk-In		Up	Courier
			1



June 18, 2021

CAPITAL CONNECTION, INC.

SUBJECT: VIAJERO HOSTELS US, CORP.

Ref. Number: P20000055101

We have received your document for VIAJERO HOSTELS US, CORP. and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Your cover sheet has the wrong entity name listed.

The fee to file your document is \$35.

There is a balance due of \$10.00.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton Regulatory Specialist II

Letter Number: 721A00013826

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	RATION: Viajero Hostels US	S, Corp.		
DOCUMENT NUME	P20000055101			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.		
Please return all corres	pondence concerning this ma	tter to the following:		
	GREG HERSKOWITZ			
	<b>-</b>	Name of Contact Person		
	HERSKOWITZ SHAPIRO P			
		Firm/ Company	· · ·	
	9130 S. Dadeland Blvd., Suit	• •		
		Address		
	Miami, FL 33156			
		City/ State and Zip Code	2	
	greg@hslawfl.com			
	E-mail address: (to be us	sed for future annual report	notification)	
For further information	n concerning this matter, pleas	se call:		
SUSAN MANSON		305 at (	423-1259	
Name o	of Contact Person	<del></del>	de & Daytime Telephone Number	
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:	
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

Viajero Hostels US, Corp.

(Name of Corporation as curr	ently filed with the Florida De	pt. of State)	
P20000055101			
(Document Numb	per of Corporation (if known)		
Pursuant to the provisions of section 607.1006, Florida Statutes, its Articles of Incorporation:	this Florida Profit Corporation	adopts the following amendment	i(s) to
A. If amending name, enter the new name of the corporation	<u>ı:</u>		
	(f. a) (f. a)	The new	
name must be distinguishable and contain the word "corporation "Inc.," or Co" or the designation "Corp," "Inc." or "Co" "chartered," "professional association," or the abbreviation "F	". A professional corporation		
B. Enter new principal office address, if applicable:		921	
(Principal office address MUST BE A STREET ADDRESS)	<del>-</del>		1.
	<del></del>	<del></del>	
			٦
C. Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
		2	
	<del>_</del>	<del></del> . =	
		<del></del>	
D. If amending the registered agent and/or registered office		ame of the	
new registered agent and/or the new registered office add	lress:		
Name of New Registered Agent		<del> </del>	
	<u>.</u>		
(Floria	la street address)		
New Registered Office Address:		Florida	
	(City)	(Zip Code)	
New Registered Agent's Signature, if changing Registered Agent's Signature, if changing Registered Agent's Agent's Signature, if changing Registered Regis	gent:		
I hereby accept the appointment as registered agent. I am famil		ons of the position.	
Signature of No	ew Registered Agent, if changing	2	
· ·		•	
Check if applicable  ☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (	(11) (e), F.S.		

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example:			
X Change	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	S	Luis Fernando Gonzalez	9130 S. Dadeland Blvd.
Add			#1609
X Remove			Miami, FL 33156
2) Change	<del></del>		
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

(Attach	nding or adding additional sheet	ts, if necessary).	(Be specific	)			
				<u>,                                      </u>			
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F. If an a	mendment pro	vides for an exc	hange, reclass	ification, or can	cellation of issu	ed shares,	
provi	isions for implei	menting the am	<u>endment if no</u>	t contained in th	<u>ie amendment i</u>	tself:	
(	if not applicable,	maicae ma)					
				<u> </u>		·	
_							
		_					

	adoption:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
	(no more than 50 days after amenament file date)	
Note: If the date inserted in thi document's effective date on the	s block does not meet the applicable statutory filing requirements, the Department of State's records.	is date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors without shareholde	r action and shareholder
☐ The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amends sufficient for approval.	ment(s)
	approved by the shareholders through voting groups. The following sufor each voting group entitled to vote separately on the amendment(s)	
"The number of votes c	ast for the amendment(s) was/were sufficient for approval	
by	"	
,	(voting group)	
05/05/20 Dated	)21	
Signature	(facility)	<del> </del>
sele	a director, president or other officer – if directors or officers have not cted, by an incorporator – if in the hands of a receiver, trustee, or othe binted fiduciary by that fiduciary)	
	CARLOS FELIPE SANTOS	
	(Typed or printed name of person signing)	
	VICE PRESIDENT	
	(Title of person signing)	