# P150000 8897

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Amend Manl

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# **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORA	TION: TAKE M	IE AWAY CUBA,	INC .
DOCUMENT NUMBE	r: <u>P15000</u>	010897	INC
The enclosed Articles of	Amendment and fee are su	bmitted for filing.	
Please return all correspo	ondence concerning this mat	tter to the following:	
	Aime P	2017	
	Time ie	Name of Contact Person	
		4	•
	TAKE ME	AWAY EUBA,	ine:
	6741 S	W 24 ST +	<i>418</i> ·
_		Address	
	Miani	f1 22155.	# 18 ·
_	1100/11	City/ State and Zip Code	e
aperez 1206@hotorail: em -			
E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:			
. 6			
Aime K	esez	at (305	570 - 76 93 · de & Daytime Telephone Number
Name of	Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:			
□ \$35 Filing Fee	Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certificate of Status

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

Street Address
Amendment Section **Division of Corporations** Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

# Articles of Amendment to Articles of Incorporation of

FI	<b>.</b>
1300	, ED
TALLATIASSEE.	3:57
<u> </u>	STATE ORIDA

(Name of Corporation as currently filed with the Florida Dept. of State)

(Document	t Number of Corporation (if known)
Pursuant to the provisions of section 617.1006, Florida amendment(s) to its Articles of Incorporation:	Statutes, this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the con	rporation:
TAKE ME AWAY TRAVEL	SERVICES, INC  The new orporation "or "incorporated" or the abbreviation "Corp." or "Inc."
name must be distinguishable and contain the word "co "Company" or "Co." may not be used in the name.	orporation" or "incorporated" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:	: 6741 Sw 245T #18
(Principal office address <u>MUST BE A STREET ADD</u>	10 141 SW 245T # 18 (18 ) Miami fl 33155
,	<del></del>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	x) 6741 SW 245T #18.
	Miami fl 33155
	_
D. If amending the registered agent and/or registere	red office address in Florida, enter the name of the
new registered agent and/or the new registered of	
Name of New Registered Agent:	
New Registered Office Address:	(Florida street address)
	, Florida
_	(City) (Zip Code)
New Registered Agent's Signature, if changing Regi	
I hereby accept the appointment as registered agent.	I am familiar with and accept the obligations of the position.
	Signature of New Registered Agent, if changing

# 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 Do	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	ones .	
X Add	<u>sv</u>	Sally Sr	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change		_		
Add				
Remove				<del>-, , , , , , , , , , , , , , , , , , , </del>
2) Change		_		
Add				<u> </u>
Remove				
3) Change			· · · · · · · · · · · · · · · · · · ·	
Add				
Remove				
4) Change				
Add				
Remove				
5) Change		_		
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Remove				
6) Change				
		<del></del>		
Add _				
Damoua				

. If amending or adding additional Articological (Attach additional sheets, if necessary).	
<del>-</del>	
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	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
	ternondez will remain with 85%
of the shares.	
Vice President Air	ne Perez will remain with 1590
of the shares.	
1	
· · · · · · · · · · · · · · · · · · ·	

The date of each amendment(s) 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)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this document's effective date on the Department of State's records.	ate will not be listed as the
Adoption of Amendment(s) ( <u>CHECK ONE</u> )	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statem must be separately provided for each voting group entitled to vote separately on the amendment(s):	ent
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by"	
by"  (voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and sharehold action was not required.	ler
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated/2_/0.3   /5	
(By a director, president or other officer – if directors or officers have not been	<b>.</b>
selected, by an incorperator – if in the hands of a receiver, trustee, or other cou appointed fiduciary by that fiduciary)	π
Daviel HernoudEZ	
(Typed or printed name of person signing)	
President.	
(Title of person signing)	