

P98000089245

(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



400136852724

10/16/08--01006--008 **35.00

FILED
2008 OCT 16 PM 2:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Amend

TB

10/22/08

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: STAR TRAVEL, TOUR & SERVICES, INC.

DOCUMENT NUMBER: P98000089245

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

MICHEL DIAZ AGUADO
(Name of Contact Person)

STAR TRAVEL, TOUR & SERVICES, INC.
(Firm/ Company)

9010 SUNRISE LAKES BLVD. # 209
(Address)

SUNRISE, FL 33322-6029
(City/ State and Zip Code)

For further information concerning this matter, please call:

MICHEL DIAZ AGUADO at (786) 728-2448
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

- | | | | |
|--|---|--|--|
| <input type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee & Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | <input type="checkbox"/> \$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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment
to
Articles of Incorporation
of

STAR TRAVEL, TOUR & SERVICES, INC.

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

P98000089245

(Document Number of Corporation (if known))

FILED
2008 OCT 16 PM 2:07
SECRETARY OF STATE
TALLAHASSEE FLORIDA

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

B. Enter new principal office address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)

9010 SUNRISE LAKES BLVD

STE # 209

SUNRISE, FL 33322-6029

C. Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

9010 SUNRISE LAKES BLVD

STE # 209

SUNRISE, FL 33322-6029

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent:

MICHEL DIAZ AGUADO

New Registered Office Address:

9010 SUNRISE LAKES BLVD STE 209

(Florida street address)

SUNRISE

(City)

Florida

(Zip Code)

33322-6029

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

X



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)

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
T	REINALDO SANDRE	Av Rio Branco 1457-A "G" SAN PAULO, BRASIL	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
P	ADRIANA S. BLANCO	2590-54 ST SW NAPLES, FL 32116	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
S	MARIA CHICARI	555 SABAL PALM CR ALTAMONTE SPRINGS, FL32700	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
PST	MICHEL DIAZ AGUADO	9010 SUNRISE LAKES BLVD STE 209 SUNRISE, FL 33322	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove <u>ADD</u>

E. If amending or adding additional Articles, enter change(s) here:

(attach additional sheets, if necessary). (Be specific)

F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:

(if not applicable, indicate N/A)

The date of each amendment(s) adoption: 10/07/2008

Effective date if applicable: 10/07/2008
(no more than 90 days after amendment file date)

Adoption of Amendment(s) (CHECK ONE)

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.

The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):

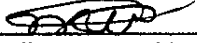
“The number of votes cast for the amendment(s) was/were sufficient for approval

by _____”
(voting group)

The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.

The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Dated 10/07/2008

Signature X 
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

MICHEL DIAZ AGUADO
(Typed or printed name of person signing)

PRESIDENT
(Title of person signing)