981PC000199

(Red	questor's Name)	
(Add	dress)	
(Add	dress)	
(City	//State/Zip/Phon	e #)
PICK-UP	WAIT	MAIL
(Bus	siness Entity Nar	me)
(Doo	cument Number)	·
Certified Copies	_ Certificate:	s of Status
Special Instructions to F	Filing Officer:	

Office Use Only



000309202500

03/02/18--01012--010 **35.00

2010 NAR -2 P 3 49
SECREPARY OF STATE
AND A SECREPARY OF STATE

HAR 0 5 2018

T. LEASE Y



COVER LETTER

TO: Amendment Section Division of Corporations

NAME O	F CORPOR	ATION: All Borders Incorp	orated	
	ENT NUMB	D17000030186		
The enclo	sed Articles o	f Amendment and fee are su	bmitted for filing.	
Please ret	urn all corres	pondence concerning this ma	tter to the following:	
	i	Monika Kar		
	_		Name of Contact Pers	son
	,	All Borders Incorporated		
	-		Firm/ Company	
	(665 NE 83 Terr Apt 507		
	-		Address	
	!	Miami, Florida 33138		
	-		City/ State and Zip Co	ode
			, ,	
	mkar@	gallbordersinc.com		
		E-mail address: (to be us	sed for future annual repo	ort notification)
For furthe	er information	concerning this matter, pleas	se call:	
Monika I	Car		at (³⁰⁵	742-7230
	Name o	f Contact Person	Area (Code & Daytime Telephone Number
Enclosed	is a check for	the following amount made	payable to the Florida De	epartment of State:
■ \$ 35 F	filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
	Mail	ing Address	Stre	et Address
	Ame	ndment Section		ndment Section
r _H		ion of Corporations		sion of Corporations
		Box 6327		on Building
	Talla	hassee Fl. 32314	2661	Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

All Borders Incorporated		
(<u>Name</u>	of Corporation as currently filed with the Florida Dep	t. of State)
P17000039186		
	(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this Florida Profit Corporation a	idopts the following amendment(s)
A. If amending name, enter the new na	ame of the corporation:	
N/A		The new
	tain the word "corporation," "company," or "incorporation "Corp," "Inc," or "Co". A professional corporation," or the abbreviation "P.A."	orated" or the abbreviation
B. Enter new principal office address, (Principal office address MUST BE A S		
		
C. Enter new mailing address, if appl (Mailing address MAY BE A POST		
		·
 If amending the registered agent an new registered agent and/or the new 	id/or registered office address in Florida, enter the na w registered office address:	me of the
Name of New Registered Agent	Elevate Your Travels LLC	
	14707 SW 7 Street	
	(Florida street address)	
New Registered Office Address:	Pembroke Pines	, Florida 33027
New Negistrea Office Address.	(City)	(Zip Code)
New Registered Agent's Signature, if c	hanging Registered Agent: tered agent. I am familiar with and accept the obligation	ns of the position.
3	11	
		2018 SEC
	Signatury of New Registered Agent, if changing	ASS -
	r	SEC 2
		U

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, an 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 = Chic Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each offic 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 Doc	
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			
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change		<u> </u>	
Add			
Remove			
5) Change		_	
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)				
Article III				
The purpose for which this corporation is organized is:				
TO TRANSACT CUSTOMS BUSINESS AS A BROKER				
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)				
N/A				

February 27	
The date of each amendment(s) adoption: date this document was signed.	, if other than the
Effective date if applicable:	
(no mos	re than 90 days after amendment file date)
Note: If the date inserted in this block does not meet t document's effective date on the Department of State's re	he applicable statutory filing requirements, this date will not be listed as theorets.
Adoption of Amendment(s) (CHECK ON	<u>(E)</u>
The amendment(s) was/were adopted by the sharehold by the shareholders was/were sufficient for approval.	ers. The number of votes cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareho must be separately provided for each voting group en	
"The number of votes cast for the amendment(s)	was/were sufficient for approval
by(voting group	
(voting group	<i>י</i>)
☐ The amendment(s) was/were adopted by the board of action was not required.	directors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the incorporation was not required.	tors without shareholder action and shareholder
2-26-2018	
Dated	
Signature Signature	
(By a director, president or o	ther officer – if directors or officers have not been
	- if in the hands of a receiver, trustee, or other court
appointed fiduciary by that f	iduciary)
Monika Kar	
(Typed or	printed name of person signing)
President	
	(Title of person signing)