G91977

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COVER LETTER

TO: Amendment Ser Division of Cor		•					
NAME OF CORPO	ORATION: V.I.P. World Trave	el of Florida, Inc.					
DOCUMENT NUMBER: G92977							
The enclosed Article	s of Amendment and fee are su	bmitted for filing.					
Please return all corr	espondence concerning this ma	tter to the following:					
	Steven Briggs						
		Name of Contact Person					
	V.I.P. World Travel						
	Firm/ Company						
	P O Box 25095						
		Address					
	Sarasota, FL 34277						
		City/ State and Zip Code					
	steve@vipworldtravel.travel						
	E-mail address: (to be us	sed for future annual report	notification)				
For further informati	ion concerning this matter, pleas	se call:					
Steven Briggs		at (377-0017 x 101				
Name of Contact Person		Area Cod	le & Daytime Telephone Number				
Enclosed is a check	for the following amount made	payable to the Florida Depa	rtment of State:				
□ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)				
Mailing Address		Street A	Address				
Amendment Section		Amendment Section					
Division of Corporations		Division of Corporations The Centre of Tallahassee					
P.O. Box 6327 Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810					

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

of V.I.P. World Travel of Florida, Inc. (Name of Corporation as currently filed with the Florida Dept. of State) G92977 (Document Number of Corporation (if known) 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: N/A name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A. 2339 Sunnyside Lane B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Sarasota, FL 34239 C. Enter new mailing address, if applicable: P O Box 25095 (Mailing address MAY BE A POST OFFICE BOX) Sarasota, FL 34277 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 (Florida street address) New Registered Office Address: (City) 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. gnature of New Registered Agent, if changing

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)

Example:

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.

X Change	<u>PT</u>	<u>John Doe</u>	
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>	Address
1) Change	D	Christine Briggs	2339 Sunnyside Lane
XAdd		•••	Sarasota, FL 34239
Remove			
2) Change	D	Allan Knops	3715 Heather Lake Circle
X Add			Sarasota, FL 34235
Remove 3) Change		N/A	
Add			
Remove			
4) Change		N/A	
Add			
Remove			
5) Change	*******	N/A	
Add			
Remove			
6) Change		N/A	
Add			
Remove			

(Attach additional sheets, if necessary).	(Be specific)
N/A	
nrovisions for implementing the arms	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	endment it not contained in the amendment usen:
N/A	

.

·	N/A	
The date of each amendment(s)	adoption:	, if other than th
date this document was signed.		
	N/A	
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the	s block does not meet the applicable statutory filing requirements, this Department of State's records.	date will not be listed as th
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were a action was not required.	adopted by the incorporators, or board of directors without shareholder ac	ction and shareholder
☐ The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment sufficient for approval.	nt(s)
	approved by the shareholders through voting groups. The following state for each voting group entitled to vote separately on the amendment(s):	ment
"The number of votes ca	ast for the amendment(s) was/were sufficient for approval	
by N/A	**	
<u></u>	(voting group)	
August	6, 2020	
Dated		
G' .		
Signature		
selec	director, president or other officer - if directors or officers have not bee sted, by an incorporator - if in the hands of a receiver, trustee, or other co- pinted fiduciary by that fiduciary)	
	Steven Briggs	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	