K91475

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SECRETARY OF STATE

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: TYCHEL RESOLT SERVICES, INC.
DOCUMENT NUMBER: K91475
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Ry Szard Huzior Name of Contact Person
Firm/ Company
13030 Gulf BIVOL Address Madeira Beach, Fl 33708 City/ State and Zip Code
E-mail address: (to be used for future annual report notification)
or further information concerning this matter, please call:
Prittary Andrias at (727) 360-2771 Name of Contact Person Area Code & Daytime Telephone Number
inclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed) \$35 Filing Fee Certified Copy (Additional Copy is enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of TallahasseeTallahassee, FL 323142415 N. Monroe Street, Suite 810Tallahassee, FL 32303

Articles of Amendment Articles of Incorporation

Travel Resort S

SCONDANIS ED

(Document Number of Corporation (if known)

nt(s) to

A. If amending name, enter the new nar	ne of the corporation: The new
name must be distinguishable and contain to "Inc.," or Co.," or the designation "Co" "chartered," "professional association," o	he word "corporation," "company," or "incorporated" or the abbreviation "Corp.," rp," "Inc," or "Co". A professional corporation name must contain the word
B. Enter new principal office address, if (Principal office address <u>MUST BE A ST.</u>	
C. Enter new mailing address, if applic (Mailing address <u>MAY BE A POST O</u>	able: FFICE BOX)
new registered agent and/or the new	<u> </u>
new registered agent and/or the new	registered office address: RYSZARA HUZIOR 13030 GUIF BIVA
new registered agent and/or the new Name of New Registered Agent New Registered Office Address: New Registered Agent's Signature, if ch	RYSTARA HUZIOR 13030 GUIF BIVA (Florida street address) Madeira Beach, Florida 33708 (City) (Zip Code)

Check if applicable

 \square 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	PT John I	<u>Doe</u>	
X Remove	V Mike	<u>Jones</u>	
X Add	<u>SV</u> <u>Sally</u>	<u>Smith</u>	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	P.D	Doreen L. Moore	13030 GWFB1Va
Add			<u>madeira Blach</u>
<u>X</u> Remove			FL 33708
2) Change	<u></u>	JOSEPH T. Jorgense	n 13030 GulfBlvd
Add		·	madeira Beach
Remove Change	$S_{,D,T}$	Ryszard Huzior	FL 33708 13030 Fult Blud
Add			Madeira Beach, Fi
_X_Remove	P		33708
4) Change	O	Ryszard Huzior	13030 GWIFBIVE
X \wedge Add			madeira Beach
Remove			FL 33708
5) Change		Doreen L. Moore	13030 FILLE Blvd
X Add			<u>madeira beach</u>
Remove			FL 33708
6) Change			
Add			
Remove			

	ling additional Art heets, if necessary).	(Be specific)			
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an amendinient ni	ovides for an exch	ange, reclassificat	ion, or cancellation	of issued shares,	
rovisions for impl	le indicate M/4\	<u>nument it not cont</u>	aineg in the amend	iment itself:	
<u>rovisions for impl</u>					
rovisions for impl (if not applicab	ic, mateure (WA)				
<u>rovisions for impl</u>					_
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<u>rovisions for impl</u>	ic, marcie (WA)				

	iment was signed.
Effective das	(no more than 90 days after amendment file date)
	(no more than 90 days after amendment file date)
	date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as ffective date on the Department of State's records.
Adoption of	Amendment(s) (CHECK ONE)
	dment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder and required.
	dment(s) was/were adopted by the shareholders. The number of votes east for the amendment(s) areholders was/were sufficient for approval.
	dment(s) was/were approved by the shareholders through voting groups. The following statement eparately provided for each voting group entitled to vote separately on the amendment(s):
"Th	e number of votes cast for the amendment(s) was/were sufficient for approval
by _	(voting group)
	(voting group)
	(voing group)
	Dated Delember 30,2021
	Dated Delember 30,2021
	Signature Representation of the officer of directors or officers have not been
	Dated_Delember 30,2021 Signature_Rynal Delices
	Signature Republic 30, 2021 Signature (By a director, president or other officer – if directors or officers have not been seleved, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
	Signature Representation (By a effector, 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
	Signature Representation of the service of the ser