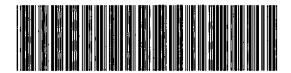
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(R	equestor's Name)				
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COVER LETTER

TO: Amendment Section **Division of Corporations**

NAME OF CORPORA	ATION: Altama	r Interna-	tional Travel
DOCUMENT NUMBI	er: P0000	0006209	2
The enclosed Articles of	f Amendment and fee are sub	omitted for filing.	
Please return all corresp	ondence concerning this mat	ter to the following:	
-	ROSA	Alvarez Name of Contact Person	n
_	Altamar	Firm/ Company	itional Travel
-	<u>3775 E</u>	. 4 Ave	
-	Hialean	City/ State and Zip Cod	<u>×013</u>
	Altamartr E-mail address: (to be use	avel a a a ded for future annual report	Ol. Com notification)
For further information	concerning this matter, please	e call:	
ROSO Name of	Contact Person	at (305 Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made p	ayable to the Florida Depa	artment of State:
□ \$35 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)
Mailing Adduses		Stract	Adduses

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

FILED
SECRETARY OF STATE DIVISION OF CORPORATION
DIVISION OF CORPORATION

Altamar Int	ernation	al	Travel	Inc.	1 PM 2: I
(Name of Corpora	ation as currently file $\widehat{\mathcal{F}}$	d with the	Florida Dept. of	State)	92
(Doc	ument Number of Corp	ooration (i	known)	/ × 0 -	
Pursuant to the provisions of section 607.1006, Flor its Articles of Incorporation:	rida Statutes, this <i>Flori</i> d	da Profit (Corporation adopts	the following am	nendment(s) to
A. If amending name, enter the new name of the	corporation:				
				The	e new
name must be distinguishable and contain the w "Corp.," "Inc.," or Co.," or the designation "Co word "chartered," "professional association," or the	rp," "Inc," or "Co".	A profes.			
B. Enter new principal office address, if applical (Principal office address MUST BE A STREET A)					
				<u> </u>	<u></u>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE E					
D. If amending the registered agent and/or regis new registered agent and/or the new registered		n Florida,	enter the name of	the	
Name of New Registered Agent					
	(Florida street ad	dress)			
New Registered Office Address:			, Flo	rida	
	(City)		,	(Zip Code,)
New Registered Agent's Signature, if changing R I hereby accept the appointment as registered agent		nd accept	the obligations of t	he position.	
Si	gnature of New Registe	ered Agent	if changing		

address of each Officer (Attach additional sheet. Please note the officer/d P = President; V = Vice Executive Officer; CFO held. President, Treasur Changes should be note.	and/or Directs, if necessary) irector title by to President; T= = Chief Financer, Director word in the following aves the corpore, and Sally Sm	he first letter of the office title: Treasurer; S= Secretary; D= Director; TR= T cial Officer. If an officer/director holds more wild be PTD. ag manner. Currently John Doe is listed as the ation, Sally Smith is named the V and S. These	Trustee; C = Chairman or Clerk; CEO = Chief than one title, list the first letter of each office PST and Mike Jones is listed as the V. There is
X Remove			
		e Jones	
X Add	<u>SV</u> <u>Sall</u>	y <u>Smith</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	<u>P</u> _	Federico Mañon	3775 E. 4 Ave
Add Remove			Hialeah, Fl 33013
Remove			
2) Change	<u> </u>	Tatiana Linares	3775 E. 4 Ave Hialeah, FL 33013
Add Remove			<u>110101111233</u> 015
3) Change	<u> </u>	Jose A. Linares	3775 E.4 Ave
Add			Hiakah, Fl33013
Remove			
4) Change	\mathcal{D}	<u>Federico Maño</u>	n 35175 & 4 Ave Highen R 38013
_X Add			MARGINICE
Remove			
5) Change			
Add			- AAP-
Remove			
6) Change			

__ Add

__ Remove

	nal sheets, if	necessary).	(Be specific)				
						V	
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f an amendme	ent provides	s for an excha	ange, reclassifi	cation, or cand	ellation of issue	d shares,	
provisions for	<u>r implement</u>	ting the amen	dment if not c	ontained in the	amendment its	<u>elf:</u>	
III MINI IIII	olicable, indi	icate IV/A)					
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The date of each amendment(s) adoption:	, if other than the
Effective date if applicable: Scotember 10, 2015 (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 date we document's effective date on the Department of State's records.	vill not be listed as the
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	<u></u>
by"	5 X
(voting group)	节温
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	SEP 21 PH
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	12:17
Signature (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)	
Tatiana Linares	
(Typed or printed name of person signing)	
President	
(Title of person signing)	