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(((H170002551543)))



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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : AMBAR DIAZ, P.A.
Account Number : 120110000016
Phone : (305)476-8100
Fax Number : (305)476-8788

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: dacosta@cubamay+ya

S TALLENT

SEP 2 9 2017

COR AMND/RESTATE/CORRECT OR O/D RESIGN CUBAMAX TRAVEL INC.

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Corporate Filing Menu

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13054226222 From: Diaz

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COVER LETTER

TO: Amendment Section Division of Corpor				
NAME OF CORPORA	ATION: CUHAMAX TRA	VEL INC.		
DOCUMENT NUMBI				
	f Amendment and fee are su	bmitted for filing.		
Please return all corresp	ondence concerning this ma	tter to the following:		
(GIRALDO ACOSTA			
_	- · · · · · · · · · · · · · · · · · · ·	Name of Contact Person	n	
(CUBAMAX TRAVEL INC.			
 -	Firm/ Company			
1	187 WEST 37TH ST			
-		Address		
ŀ	HALEAH, FL 33012			
-		City/ State and Zip Cod	e e	
gacosta	்டுcubamaxtravel.com		/	
	E-mail address: (to be us	sed for future annual report	notification)	
For further information	concerning this matter, pleas	se call:		
GIRALDO ACOSTA		305 at (
Name of	Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check for t	the following amount made	payable to the Florida Depa	rtment of State:	
☐ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Anien Divisi P.O. E	ng Address dment Section on of Corporations Box 6327 hassee, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section n of Corporations Building xecutive Center Circle ssee, Fl. 32301	

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Articles of Amendment to Articles of Incorporation of

CUBAMAX TRAVEL INC.			
(Name)	Corporation as current	v filed with the Florida Dept. of St	late)
P01000059421			
	(Document Number o	f Corporation (if known)	
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, this	Florida Profit Corporation adopts t	he following amendment(s) to
A. If amending name, enter the new na	me of the corporation:		
NO CHANGES			The new
name must be distinguishable and con "Corp." "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp," "Inc," or '	'Co". A professional corporation i	" or the abbreviation
B. Enter new principal office address, if applicable:		NO CHANGES	٠٨
(Principal office address MUST BE A S			
			m Ö
		****	~ ~ ~ ~
C. Enter new mailing address, if applicable; (Mailing address MAY BE A POST OFFICE BOX)		NO CHANGES	
		•	,
D. If amending the registered agent an new registered agent and/or the nev			<u>he</u>
	NO CHANGES	E.	
Name of New Registered Agent			
	NO CHANGES		
	(Florida sti	eet address)	
New Registered Office Address:		(City), Flori	
		(CIN)	(Lip Code)
New Registered Agent's Signature, if vi I hereby accept the appointment as regist			v position.
	Signature of New F	egistered Agent, if changing	/=

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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)

Please now 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 = ChiefExecutive 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 Example:

X.Change	PI	John Doe				
X Remove	<u>v</u>	Mike Jones				
X Add	<u>sv</u>	Sally_Smith				
Type of Action (Check One)	Title	Name	Verples			
1) Change	D	ALEJANDRO D MARTINEZ PARDO	7621 SW 142 AVE			
X Add			MIAMI, FL 33183			
Remove						
2) Change						
Add						
Remove						
3) Change	-					
Add						
Remove						
4) Change						
Add						
Remove						
5) Change						
Add						
Remove						
0						
6) Change						
Add						
Remove						

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(((H17000255154 3))) E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Re specific) NO CHANGES F. Han 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) NO CHANGES

(((H17000255154 3)))

The date of each amendment(s) date this document was signed.	adoption:, if other	than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the I	block does not meet the applicable statutory filing requirements, this date will not be liste Department of State's records.	d as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
	pproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):	
"The number of votes ca	st for the amendment(s) was/were sufficient for approval	
by	<u></u>	
	(voling group)	
The amendment(s) was/were a action was not required,	dopted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were a action was not required.	dopted by the incorporators without shareholder action and shareholder	
	IBER 25, 2017	
Dated		
S:		
Signature (By a	director, president or other officer - if directors or officers have not been	
selec	led, by an incorporator if in the hands of a receiver, trustee, or other court	
*ppo	irfed fiduciary by that fiduciary)	
	GIRALDO ACOSTA	
	(Typed or printed name of person signing)	
	DIRECTOR, PRESIDENT	
	(Title of seven circuins)	

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