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(((H180000936673)))



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Phone :

: (305)476-8100

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CUBAMAX TRAVEL INC.

MAR 26 2013

S. YOUNG

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COVER LETTER

Division of Corpo					
NAME OF CORPORATION: CUBAMAX TRAVEL INC.					
DOCUMENT NUMBER: P01000059421					
The enclosed Articles of	of Amendment and fee are su	bmitted for filing.			
Please return all corres	pondence concerning this ma	tter to the following:			
	GIRALDO ACOSTA				
		Name of Contact Person	n		
-	CUBAMAX TRAVEL INC.				
		Firm/ Company	 ,		
	1187 WEST 37TH ST				
•		Address			
_	HIALEAH, FL 33012				
•	•	City/ State and Zip Cod	e		
gacost	a@cubamax.com				
	E-mail address: (to be u	sed for future annual report	notification)		
For further information	concerning this matter, pleas	se call:			
GIRALDO ACOSTA		at (305	512-0303		
Name o	f Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check for	the following amount made	payable 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)		
Ame Divis P.O.	ing Address ndment Section tion of Corporations Box 6327	Amend Divisio Clifton	Address Iment Section on of Corporations Building		
Tallahassee, FL 32314			executive Center Circle		

Articles of Amendment to Articles of Incorporation (((H18000093667 3)))

CUBAMAX TRAVEL INC. (Name of Corporation as currently filed with the Florida Dept. of State) P01000059421 (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: NO CHANGES name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." NO CHANGES B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: **NO CHANGES** (Mailing address MAY BE A POST OFFICE BOX) 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: **NO CHANGES** Name of New Registered Agent NO CHANGES (Florida street address) New Registered Office Address: Florida (City) (Zip Code) 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.

Signature of New Registered Agent, if changing

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 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 Doc		
X Remove	¥	Mike Jones		
X Add	<u>\$V</u>	Sally Smith		
Type of Action (Check One)	Title	Name	Address	
1) X Change	D, P, S	GIRALDO ACOSTA	735 W 60 ST	
Add			HIALEAH, FL 33012	
Remove				
2) Change	D	YVONNE CANELA	1383 W 69 ST	
Add			HIALEAH, FL 33014	
Remove				
3)Change				
Add				
Remove				
4) Change				
Add				
Remove			4., 	
5) Change				
Add				
Remove				
6) Change				
Add		···		
Remove				

	(((H18000093667 3)))
E. If amending or adding additional Articles, enter change(s) here:	
(Attach additional sheets, if necessary). (Be specific)	
NO CHANGES	
	•
,	
•	
F. If an amendment provides for an exchange, reclassification, or cancell	ation of issued shares,
provisions for implementing the amendment if not contained in the au (if not applicable, indicate N/A)	mendment itself:
NO CHANGES	

	(((HT80000936673))
The date of each amendment(s) adoption: date this document was signed.	-if other tha
Effective date if applicable:	s ulter amerillism (He date)
Note: If the date inserted in this thick they got men the applicable documents effective date on the Department of State's records.	
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/yere adopted by the shareholders. The number the shareholders was were sufficient for approval.	ber of votes cast for the amendment(s)
The amendment(s) versivere approved by the shareholders through must be separately provided for editionality group entitled to with	
The number of yolds reast for the amendment(s) was were suf	lickyn for approval
by Krifte; group)	
□ The amendment(s) was were useficed by the hearth of directors with a gelion was not required.	antshareholder action and shareholder
[] The americane it(s) was were adopted by the incorporators without action was not required.	hareholder nellon und shirreholder
Dated MARCH 3-2018	
Signature Des bresident ar other officer	If directors or officers have not been
appointed interiory by that fiduciary)	ds of a receiver, invites, or other court
GIRAL DO ACOSTA	
(Typed be printed many DIRECTOR: PRESIDENT	rof person signing)
(1) मिट्ट विकास	rson signing):

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