## P03000132471

| (Requ   | (Requestor's Name) |              |  |  |
|---|--------------------|--------------|--|--|
| Golden Travel & Courier 12425 Collier Blvd. Ste 105 Waples, Florida 34116 |                    |              |  |  |
| (City/  | State/Zip/Phone #  | f)           |  |  |
| PICK-UP   | ☐ WAIT             | MAIL         |  |  |
|   |                    | <del>,</del> |  |  |
| (Busi   | ness Entity Name   | ·)           |  |  |
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| Certified Copies  | Certificates o     | of Status    |  |  |
| Special Instructions to Fi  | ling Officer:      |              |  |  |
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Office Use Only



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2018 AUG 10 AM 9: OG SECRETARY OF STATE TALLAHASSFF, FI

C. GOLDEN AUG 1 4 2018

## Articles of Amendment to Articles of Incorporation of

## FILED

**GOLDEN TRAVEL & COURIER INC** 

2018 AUG 10 AM 9: 00

| (Name of Corporation  | on as currently filed with the Florida Dept. of State) FIARY OF STATE  |
|---|--|
| P03000132471  | on as currently filed with the Florida Dept. of State TARY OF STATE TALLAHASSEE, FL  |
| (Docum  | ent Number of Corporation (if known)   |
| Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:  | Statutes, this Florida Profit Corporation adopts the following amendment(s)  |
| A. If amending name, enter the new name of the co   | rporation:   |
|   | The new  |
|   | d "corporation," "company," or "incorporated" or the abbreviation " "Inc," or "Co". A professional corporation name must contain the abbreviation "P.A." |
| B. Enter new principal office address, if applicable  |  |
| (Principal office address <u>MUST BE A STREET ADD</u>   | RESS )   |
|   |  |
|   |  |
| C. Enter new mailing address, if applicable:  |  |
| (Mailing address MAY BE A POST OFFICE BO.   | <u></u>  |
|   |  |
|   |  |
|   |  |
| D. If amending the registered agent and/or register new registered agent and/or the new registered of the new |  |
|   | · · · · · · · · · · · · · · · · · · ·  |
| Name of New Registered Agent  |  |
|   | (Florida street address)   |
|   | (Florida street daaress)   |
| New Registered Office Address:  | , Florida<br>(City) (Zip Code)   |
|   | (Сіў) (гір Сойе)   |
|   |  |
| New Registered Agent's Signature, if changing Regi  | istered Agent:   |
|   | l am familiar with and accept the obligations of the position.   |
|   |  |
|   |  |
| Signe   | tture 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.

| Example: X Change          | <u>PT</u>    | John Doc            |                     |  |  |
|----------------------------|--------------|---------------------|---------------------|--|--|
| 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>         | <u>Addres</u> s     |  |  |
| I) Change                  | P            | CARMEN PINEDO       | 3079 4TH ST SW      |  |  |
| Add                        |              |                     | NAPLES, FL 34116    |  |  |
| X Remove                   |              |                     |                     |  |  |
| 2) Change                  | VP           | JORGE PINEDO        | 3079 4TH ST SW      |  |  |
| Add                        |              |                     | NAPLES, FL 34116    |  |  |
| X Remove                   |              |                     |                     |  |  |
| 3) Change                  | P            | ANDRES J. BAIXARIAS | 7499 BRISTOL CIRCLE |  |  |
| X Add                      |              |                     | NAPLES, FL 34120    |  |  |
| Remove                     |              |                     |                     |  |  |
| 4) Change                  | VP           | CHARO L. TATAJE     | 7499 BRISTOL CIRCLE |  |  |
| X Add                      |              |                     | NAPLES, FL 34120    |  |  |
| Remove                     |              |                     |                     |  |  |
| 5) Change                  | Т            | SERGIO BAIXARIAS    | 7499 BRISTOL CIRCLE |  |  |
| X Add                      |              |                     | NAPLES, FL 34120    |  |  |
| Remove                     |              |                     |                     |  |  |
| б) Change                  |              |                     |                     |  |  |
| Add                        |              |                     |                     |  |  |
| Remove                     |              |                     |                     |  |  |

| If an 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/4) | . <u>If amending or adding addi</u><br>(Attach additional sheets, if n | tional Articles, ento<br>ecessary). (Be spe | er change(s) here:    |                                       |            |               |
|--|--|---|-----------------------|---------------------------------------|------------|---------------|
| provisions for implementing the amendment if not contained in the amendment itself:  |  |   |                       |                                       |            |               |
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| 07/19/2018   |             |
|--|-------------|
| The date of each antenderical, adaption  | r than the  |
| date this document was signed.   |             |
| 07/19/2018  Effective date if applicable:  |             |
| (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 will not be list document's effective date on the Department of State's records.  | ited 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  |             |
| by"  (voting group)  |             |
| (voting group)   |             |
| ☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.  |             |
| ☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.   |             |
| 07/19/2018   |             |
| Signature Signat |             |
| (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)   |             |
| ANDRES BAIXARIAS   |             |
| (Typed or printed name of person signing)  | _           |
| PRESIDENT  |             |
| (Title of person signing)  |             |