P04000077131

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Ĉit	y/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Name)	
(Do	cument Number)	
Certified Copies	_ Certificates of	Status
Special Instructions to	Filing Officer:	





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02/04/05--01036--012 **35.00



GLYSY.

COVER LETTER

TO: Amendment Section Division of Corporations	_
NAME OF CORPORATION: MIAMI Spec	CIA/TOURS, IN
DOCUMENT NUMBER: PO 4000	077/3/
The enclosed Articles of Amendment and fee are submitted for fil	ing.
Please return all correspondence concerning this matter to the following	owing:
(Name of Contact Person)	rcA
LA ColouiA 7 (Firm/Company)	PAUP/
2289 NW 28 ST (Address)	Suite 1)
MIAMI F = 3 (City/ State/ and Zip Code)	33/42
(City/ State/ and Zip Code)	
For further information concerning this matter, please call: 2equip 1011 A at 305 (Area Co	, 637-07-11
(Name of Contact Person) (Area Co	de & Daytime Telephone Number)
Enclosed is a check for the following amount:	
\$35 Filing Fee \$\times \$43.75 Filing Fee & \$\times \$43.75 Filing Certified Cop (Additional cenclosed)	y Certificate of Status
Amendment Section Amend Division of Corporations Division	Address Iment Section on of Corporations Gaines Street

Tallahassee, FL 32399

Tallahassee, FL 32314

Articles of Amendment
to Son Son Son Son Son Son Son Son Son So
Articles of Incorporation
MAMI Special Tours TNC 150
(Name of corporation as currently filed with the Florida Dept. of State)
(Name of conformion as currently fined with the Florida Dept. of State)
PO 4000077-131
(Document number of corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:
NEW CORPORATE NAME (if changing):
EZ TRAIS BUS LINES INC
(Must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.") (A professional corporation must contain the word "chartered", "professional association," or the abbreviation "P.A.")
AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: (BE SPECIFIC)
Article I:
The NAME OF The ConpORATION Shall be
EZTRAI/SBUSLINGS INC
Haride II:
The Principal NAPP OF business Address Shall be
9572 SUDNEV HAVES RD SUITE #102
OR/ANDO, FL 32824
(SEE ATTACHMENT)
(Attach additional pages if necessary)
If an amendment provides for 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)

(continued)

The date of each amendment(s) adoption:		
Effective date if applicable:		
(no more than 90 days after amendment file date)		
Adoption of Amendment(s) (CHECK ONE)		
The amendment(s) was/were approved 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)		
☐ 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.		
Signed this 3/ day of		
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) (Typed or printed name of person signing)		
(Title of person signing)		

ATTACHMENT

THE MAILING ADDRESS OF THE CORPORATION IS:

2150 NW 23 COURT APT 3 MIAMI, FL 33142