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COVER LETTER

Division of Corporations NAME OF CORPORATION: Orlando Trasnsportation & Tours, Inc. DOCUMENT NUMBER: P05000005564 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Michelle L. Perez-Farinha Name of Contact Person Orlando Transportation & Tours, Inc. Firm/ Company 12738 Topsfield Drive Address Orlando, FL 32837 City/ State and Zip Code hichickinfl@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (407) 859-0021
Area Code & Daytime Telephone Number Michelle L. Perez-Farinha Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee **□\$43.75** Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy (Additional Copy enclosed) is enclosed)

Mailing Address

TO: Amendment Section

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 Articles of Incorporation of

Orlando Transportation & Tours, Inc. (Name of Corporation as currently filed with the Florida Dept. of State)

P0500005564	er of Corporation (if known)		_
(Document Numbe	i of Corporation (if known)		
Pursuant to the provisions of section 607.1006, Floits Articles of Incorporation:	orida Statutes, this <i>Florida Profit Corpora</i>	ation adopts the following	ng amendment(s)
A. If amending name, enter the new name of th	e corporation:		
			The new
name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation "Cword "chartered," "professional association," or	Corp," "Inc," or "Co". A professional c	ncorporated" or the a orporation name must	bbreviation contain the
B. Enter new principal office address, if applic (Principal office address MUST BE A STREET).	able: 4DDRESS)		_
			_
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)			_
			_
D. If amending the registered agent and/or reg new registered agent and/or the new register		he name of the	
Name of New Registered Agent			14.7
	(D) and the latest terminal te		HAR 2
	(Florida street address)		
New Registered Office Address:	, F	lorida	_ 🔐 호텔
	(Спу)	(Zip Code)	61 STALE
New Registered Agent's Signature, if changing I hereby accept the appointment as registered age		gations of the position.	
Signature e	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 D	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	<u>ones</u>	
X Add	<u>sv</u>	Sally S	<u>mith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change	S		Michelle L. Perez-Farinha	12738 Topsfield Drive
Add				Orlando, FL 32837
Remove				
2) Change				
Add				
Remove				
3) Change		_		
Add				
Remove				
4) Change				<u>-, , , , , , , , , , , , , , , , , , , </u>
Add				
Remove				
5) Change	<u></u>			
Add				
Remove				
6) Change				
Add				
Remove				
I I Remove				

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nge, reclassifi dment if not c	cation, or canco	ellation of issued amendment itsel	<u>shares,</u> <u>f:</u>
			
	inge, reclassifi	inge, reclassification, or cance	ange, reclassification, or cancellation of issued dment if not contained in the amendment itsel

The date of each amendment(s) adoption: 03/01/2014	, if other than the
date this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendment file date)	
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)	
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.	
Dated_ 03/08/2014	
Signature W. H. Fazinher	
(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)	
Maria H. Farinha	
(Typed or printed name of person signing)	
President	
(Title of person signing)	