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COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: CORRECTION TO ARTICLES OF INCORPORATION (Name of Corporation)		
DOCUMENT NUMBER: P06000067		
The enclosed Articles of Correction and fee		
Please return all correspondence concerning	g this matter to the following:	
LEOPOLDO GOMEZ		
(Name of Contact Person)		
GMCS CORPORATION		
(Firm/Company)		
245 SE 1ST STREET STE 430		
(Address)		
MIAMI, FL. 33131		
(City/State and Zip Code) For further information concerning this mat	ter please call	
for further information concerning this man	iter, please carr.	
LEOPOLDO GOMEZ (Name of Contact Person)	at (305) 579-4727 (Area Code & Daytime Telephone Number)	
(Name of Contact Person)	(Area Code & Daytime Tetephone Number)	
Enclosed is a check for the following amou	nt:	
\$35.00 Filing Fee	\$43.75 Filing Fee & Certificate of Status	
▼ \$43.75 Filing Fee & Certified Copy	\$52.50 Filing Fee, Certificate of Status & Certified Copy	
Mailing Address:	Street Address:	
Amendment Section	Amendment Section	
Division of Corporations	Division of Corporations	
P.O. Box 6327	Clifton Building	
Tallahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301	

ARTICLES OF CORRECTION

for

KING TRAVEL DE VENEZUEL, INC.

Name of Corporation as currently filed with the Florida Dept. of State

O6 MAY 19 AM 9: 23 TALLAHASSEE, FLORIDA

P06000067882

Document Number (if known)

Pursuant to the provisions of Section 607.0124 or 617.0124, Florida these Articles of Correction within 30 days of the file date of the doc	Statutes, this corporation files cument being corrected.
These articles of correction correct ARTICLE OF INCORPOR	RATION
These articles of correction correct (Document Type Bo	eing Corrected)
filed with the Department of State on MAY 15, 2006 (File Date of Document)	·
Specify the inaccuracy, incorrect statement, or defect:	
KING TRAVEL DE VENEZUEL, INC.	
THE THE PLANT OF T	
Correct the inaccuracy, incorrect statement, or defect: KING TRAVEL DE VENEZUELA, INC.	
•	
	
alletile	
(Signfature of a threath, president or other officer. If directors or not been selected, by an incorporator if in the hands of the recei other count appointed fiduciary, by that fiduciary.	officers have ver, trustee, or
GERARDO VILLAFANE	DIRECTOR
(Typed or printed name of person signing)	(Title of person signing)

Filing Fee: \$35.00