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COVER LETTER

Amendment Section Division of Corporations

TO:

SUBJECT: UNIQUE TOURS VACATIONS INC. (Name of Corporation)		
DOCUMENT NUMBER:		
The enclosed Officer/Director and fee are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
AMELIA JAVIER		
(Name of Person)		
A & M ACCOUNTING & PROF SUCET INC. (Name of Firm/Company)		
1695 NE - 123 14 ST. (Address)		
(City/State and Zip Code)		
For further information concerning this matter, please call:		
AMELIA JAVIER at (305) 893 2670 (Name of Person) (Area Code & Daytime Telephone Number)		
Enclosed is a check for \$35.00 made payable to the Florida Department of State.		

Mailing Address:
Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

CR2E044(08/05)

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

_	UNIQUE	TOURS	VACATION	la Dept. of State) ARY OF OF OWN)	· · ·
	(Name of Corp	oration as curren	tly filed with the Florid	la Dept. of State)	7 12: ₅₆
		PO90000	072117	ASSEE, E	STATE
		(Document Numb	er of Corporation (if known	own)	ORIDA
Pursuant amendme	to the provisions of ent(s) to its Articles of	section 607.1006, Incorporation:	Florida Statutes, this F	lorida Profit Corporation	adopts the following
A. <u>If am</u>	ending name, enter t	he new name of t	he corporation:	,	
					The new
abbreviai	tion "Corp.," "Inc.,"	or Co.," or the d	esignation "Corp," "In	"company," or "incorpo c," or "Co". A profession the abbreviation "P.A."	rated" or the al corporation
	new principal office				
(Principa	d office address <u>MUS</u>	<u>T BE A STREET</u>	<u>ADDRESS</u>)		
			-		
	r new mailing addres ling address <u>MAY BE</u>		<u> BOX</u>)		
	ending the registered registered agent and/			n Florida, enter the name	of the
Δ	lame of New Registere	ed Agent:			
<u>N</u>	ew Registered Office A	<u> </u>	(Florida street e	address)	
		_		, Florida	
	,		(City)	(Zip Code)	
New Reg	istered Agent's Signa	iture, if changing	Registered Agent:		
				and accept the obligations o	f the position.
					
		Sig	nature of New Registere	d 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)

Title	Name	Address	Type of Action
D_	Name ALCALDE VASALLO	JUAN 12735 SW.2	24.57 Add
		33027	Remove
		<u></u>	
			Remove
		-	Remove
	ding or adding additional Articles,		
(attach a	dditional sheets, if necessary). (Be	specific)	
			
			· · · · · · · · · · · · · · · · · · ·
F. <u>If an a</u>	nendment provides for an exchang	e, reclassification, or cancellation	on of issued shares,
provisi (if n	ons for implementing the amendment applicable, indicate N/A)	nt if not contained in the amen	dment itself:
	,		

The date of each amendment(s) adopt	ion:
Effective data if annlicables	
(no more	e than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were adopted by the shareholders was/were sufficient	by the shareholders. The number of votes cast for the amendment(s) ent for approval.
	ed by the shareholders through voting groups. The following statemen voting group entitled to vote separately on the amendment(s):
"The number of votes cast for th	e amendment(s) was/were sufficient for approval
by	roup)
(voting g	roup)
The amendment(s) was/were adopted action was not required.	by the board of directors without shareholder action and shareholder
The amendment(s) was/were adopted action was not required.	by the incorporators without shareholder action and shareholder
Dated 08/0	1/2011
Signature(By a director selected, by a	, president or other officer – if directors or officers have not been in incorporator – if in the hands of a receiver, trustee, or other court uciary by that fiduciary)
JUA	(Typed or printed name of person signing)
_ 	(Typed or printed name of person signing)
D16	RECTOR
	(Title of person signing)