## P09 0000 72117

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TALLAHASSEE FLOOR

FEB 1 8 2016
C. CARROTHERS

## **COVER LETTER**

TO: Amendment Section Division of Corporations	
NAME OF CORPORATION: UNIQUE	TOURS VARATIONS INC
DOCUMENT NUMBER: 109000	72117
The enclosed Articles of Amendment and fee are sub-	nitted for filing.
Please return all correspondence concerning this matter	er to the following:
Minu	am Villena
	Name of Contact Person
<u>UNIQUE</u>	Firm/ Company  RD. #25/2  Address  S. BEACH, Fl. 33/60  City/ State and Zip Code
	Firm/ Company
16900 N. BAY	RD. #25/2
	Address
SONNY ISLE	g BEACH, +1. 33160
,	City/ State and Zip Code
miriamVillena	ka hotmail. com be used for future annual report notification)
E-mail address: (to	be used for future annual report notification)
For further information concerning this matter, please	call:
MINIAM VILLENA	at (305) 469 - 7381  Area Code & Daytime Telephone Number
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made pa	yable to the Florida Department of State:
□ \$35 Filing Fee & Certificate of Status	Certified Copy (Additional copy is enclosed)  \$\int \frac{1}{3}\$52.50 Filing Fee  Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address	Street Address
Amendment Section Division of Corporations	Amendment Section Division of Corporations
P.O. Box 6327	Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

## Articles of Amendment

to

Articles of Incorporation of

UNIQUE TOURS VAC	ATTONS, INC	
(Name of Corporation as currently filed with the Flo	orida Dept, of State)	<del>-</del>
P09000072117		
(Document Number of Corporation (if I	known)	<del>-</del>
Pursuant to the provisions of section 607.1006, Florida Statutes, this confidence incorporation:	corporation adopts the following amendmen	t(s) to its Articles of
A. If amending name, enter the new name of the corporation:		
name must be distinguishable and contain the word "corporation, "Corp.," "Inc.," or Co.," or the designation "Corp." "Inc." or "Coword "chartered," "professional association," or the abbreviation "P.	o". A professional corporation name mus .A."	t contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	SUNNY ISLES BE	25/2
(Frincipal vijice address MOST DE A STREET ADDRESS)	SUNNY ISLES BE	<u>4</u> ett
	T1. 33160	_
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	16900 N. BAY RD. +	=2512
	16900 N. BAY RD. + SUNNY JSLES BE F1. 33160	ACH
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:		70 ZO
Name of New Registered Agent	<del> </del>	IGRET LAND
(Florida stre	eet address)	*17 AM GARYOF ASSEEJF
New Registered Office Address: (City)	, Florida (Zip Code	_ = = 0
New Registered Agent's Signature, if changing Registered Agent:  I hereby accept the appointment as registered agent. I am familiar wi	ith and accept the obligations of the position	, I.

Page 1 of

Signature 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	PT John	<u>Doe</u>	
X Remove	Y Mike	<u>Jones</u>	
X Add	SV Sally	Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) X Change	MS	JARMIN VALDES	16900 N. BAY RD. #2512
Add		PT	SUNNY JSCES BEACH
_ Remove			F1. 33160
2) Change	<u>M</u> ¢	MIRIAM VILLENA	SUNNY ISLES BEALH
X Add		VP	JUNNY ISLES BLACK
Remove			FL 33160
3) Change		<del></del>	<del> </del>
Add			
Remove			
4) Change	<del></del>	· · · · · · · · · · · · · · · · · · ·	<del></del>
Add			
Remove			
5) Change	- <del></del>		
Add			
Remove			
6) Change			
Add			
Remove			

	f amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)
	**
	an amendment provides for an exchange, reclassification, or cancellation of issued shares, royisions for implementing the amendment if not contained in the amendment itself:  (if not applicable, indicate N/A)
5	DO/O OWNERSHIP TO MINAM VILLENA
57	0% OWNERSHIP TO JAZMIN VALDES

ate this document was signed.	
ffective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
doption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were adopt by the shareholders was/were suff	ed by the shareholders. The number of votes cast for the amendment(s) icient for approval.
	eved by the shareholders through voting groups. The following statement ach voting group entitled to vote separately on the amendment(s):
"The number of votes cast fo	or the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
The amendment(s) was/were adopt action was not required.	ed by the board of directors without shareholder action and shareholder
The amendment(s) was/were adopt action was not required.	ed by the incorporators without shareholder action and shareholder
Dated02	102/16/
Signature	
(By a directed,	by an incorporator – if in the hands of a receiver, trustee, or other court d fiduciary by that fiduciary)
	JAZMIN VALDES
<del></del>	(Typed or printed name of person signing)
	PRESIDENT