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## **COVER LETTER**

TO: Amendment Section

P.O. Box 6327

Tallahassee, FL 32314

Division of Corporations NAME OF CORPORATION: SAN CRISTOBAL TRAVEL DOCUMENT NUMBER: P10000062515 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: MARIA DE JESUS EVORA Name of Contact Person EVORA CHARLON ENTERPRISES LLC Firm: Company 12750 SW 4th CT J314 Address PEMBROKE PINES, FL 33027 City/ State and Zip Code mjevora@live.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at ( 786 ) 222-7408

Area Code & Daytime Telephone Number MARIA DE JESUS EVORA Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: □ \$43.75 Filling Fee & ☐\$52.50 Filing Fee \$35 Filing Fee □\$43.75 Filing Fee & Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Street Address **Mailing Address** Amendment Section Amendment Section Division of Corporations Division of Corporations

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

## Articles of Amendment to Articles of Incorporation of

SAN CRISTOBAL TRAVEL INC

rporation (if known)	
cida Profit Corporation adopts the fol	lowing amendment(s)
	The new
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•	2023
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in Florida, enter the name of the	型 ···
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iddress)	-
Elorida	
	(Zip Code)
	pany, or "incorporated" or the abbre ofessional corporation name must of in Florida, enter the name of the iddress)

Check if applicable

■ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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)

Example:

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.

X Change	<u>PT</u>	John Doe	
X Remove	$\underline{\mathbf{V}}$	Mike Jones	
X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) X Change	VP	MARIA DE JESUS EVORA	15000 FEATHERSTONE WAY
Add			DAVIE. FI. 33331
Remove 2) Change	РТ	AILIN LEVY	15000 FEATHERSTONE WAY
X Add	<del></del>		DAVIE, FL 33331
Remove 3) Change			
Add			- <del></del>
Remove			
Add Remove			
5) Change			
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Remove 6) Change			
Add			
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ravisions for i	t provides for an ex mplementing the an	change, reclassific nendment if not co	anon, or cancenau ntained in the am	ion of issued share endment itself:	. <del></del>
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The date of each amendment(s) addate this document was signed.	option:	, if other than the
06-01	/2020	
Effective date <u>if applicable</u> :		
	tno more than 90 days after amend	lment <sub>i</sub> lde date)
<b>Note:</b> If the date inserted in this blo document's effective date on the Dep		ng requirements, this date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
☐ The amendment(s) was/were adopaction was not required.	oted by the incorporators, or board of directors	without shareholder action and shareholder
The amendment(s) was/were adop by the shareholders was/were suf	oted by the shareholders. The number of votes ficient for approval.	east for the amendment(s)
	roved by the shareholders through voting group each voting group entitled to vote separately on	
"The number of votes cast f	or the amendment(s) was were sufficient for ap	proval
bv		<del>, .</del>
	(voting group)	<del></del>
06/15/2020 Dated Signature	izul	
selected.	actor president or other officer—if directors or , by an incorporator – if in the hands of a received fiduciary by that fiduciary)	
;	MARIA DE JESUS EVORA	
-	(Typed or printed name of person sig	gning)
Ī	PRESIDENT	

(Title of person signing)