## Florida Department of State Division of Corporations Electronic Filing Cover Sheet

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COR AMND/RESTATE/CORRECT OR O/D RESIGN SAGUA SERVICES & TRAVEL, INC

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Corporate Filing Menu

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## **COVER LETTER**

Division of Corp			
NAME OF CORPO	RATION: SAGUA SERVIC	ES & TRAVEL, INC	
DOCUMENT NUM	BER: P11000015762		· · · · · · · · · · · · · · · · · · ·
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	RAUL LOUREIRO		
		Name of Contact Person	1
	SAGUA SERVICES & TRA	VEL. INC	
		Firm/ Company	
	6465 SW 8TH ST		
	· · · · · · · · · · · · · · · · · · ·	Address	
	MIAMI, FL 33144		
		City/ State and Zip Cod	B
sagu	aservices@gmail.com		
		sed for future annual report	notification)
		,	
For further informatio	n concerning this matter, pleas	se call:	
RAUL LOUREIRO		at ( 786	405-5056
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment of State:
\$35 Filing Fee	□\$43.75 Filing Fec & Certificate of Status	☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
	iling Address	Street Address	
Amendment Section Amendment Section			
	Division of Corporations P.O. Box 6327  Division of Corporations Clifton Building		
Tallahassee, FL 32314 2661 Executive Center Circle			
Tallahassee, FL 32301			

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Articles of Incorporation SAGUA SERVICES & TRAVEL, INC. (Name of Corporation as currently filed with the Florida Dept. of State) PI1000015762 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the cornoration: **NO CHANGES** name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." 6465 SW 8 ST B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)  $\overline{\infty}$ MIAMI, FL 33144 C. Enter new mailing address, if applicable: 6465 SW 8 ST (Mailing address MAY BE A POST OFFICE BOX) MIAMI, FL 33144 D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: **NO CHANGES** Name of New Registered Agent 6465 SW 8 ST (Florida street address) Florida\_33144 MIAMI New Registered Office Address: (Zip Code) (City) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

**Articles of Amendment** 

Signature of New Registered Agent, if changing

address of each Officer: (Attach additional sheets, Please note the officer/dit P = President; V = Vice . Executive Officer; CFO : held. President, Treasure. Changes should be noted	and/or I if neces: rector tite Presiden: Chief I r, Direct in the fo	Director being added: sary) le by the first letter of the office title: t; T= Treasurer; S= Secretary; D= Director; Financial Officer. If an officer/director holds or would be PTD. Allowing manner. Currently John Doe is listed corporation, Sally Smith is named the V and S.	officer/director being removed and title, Harne, and  TR= Trustee; C = Chairman or Clerk; CEO = Chief is more than one title, list the first letter of each office It as the PST and Mike Jones is listed as the V. There is These should be noted as John Doe, PT as a Change,
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	Askiress
1) X Change	P	RAUL LOUREIRO	6465 SW 8TH ST
Add	-		MIAMI, FL 33144
Remove			
2) X Change	P	RAUL C LOUREIRO	6465 SW 8TH ST
Add			MIAMI, FL 33144
Remove			
3 ) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Remove			
6) Change			<u> </u>

\_Add

Remove

D. M M	(((H18000074039 3))
E. If amending or adding additional Articles, enter change(s) here:  (Attach additional sheets, if necessary). (Be specific)	
NO CHANGES	
<u>, , , , , , , , , , , , , , , , , , , </u>	
F. If an amendment provides for an exchange, reclassification, or cancellation provisions for implementing the amendment if not contained in the amend (if not applicable, indicate N/A)	of issued shares. ment itself:
NO CHANGES	
	······································

The date of each amendment(s) adoption: (((1180000740393)))
date this document was signed.
Effective date if applicable:
Effective date if applicable:  (no more than 90 days after amendment file date)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were adopted by the shareholders. The number of votes east 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 MARCH 6, 2018 Signature
(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)
RÁUL LOÚREIRO
(Typed or printed name of person signing)
PRESIDENT
(Title of person signing)

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