# P11000035716

| (Re                     | equestor's Name)   |             |
|-------------------------|--------------------|-------------|
| (Ad                     | dress)             |             |
| (Ad                     | ldress)            |             |
| (Cit                    | ty/State/Zip/Phon  | e #)        |
| PICK-UP                 | ☐ WAIT             | MAIL        |
| (Bu                     | isiness Entity Nar | me)         |
| (Do                     | ocument Number)    |             |
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07/23/12--01016--026 \*\*35.00

TALLAHASSEE, FLORIDA

7/23/12 RW Amord

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

| · · · · · · · · · · · · · · · · · · ·  |
|--|
| NAME OF CORPORATION: Amen Can Hentage Tours, Inc   |
| DOCUMENT NUMBER: P1100035716   |
| The enclosed Articles of Amendment and fee are submitted for filing.                                       |
| Please return all correspondence concerning this matter to the following:                                  |
| Debra 5. miller  |
| Name of Contact Person   |
| American Hentage Tours, Inc  |
| 1405 N. Pade Blvd.   |
| Address  Navor and a Fl 32505  |
| City/ State and Zip Code   |
|  |
| Denva @ Amen can ten tage 10015. net<br>E-mail address: (to be used for future annual report notification) |
| . ,  |
| For further information concerning this matter, please call:   |
| Debva Miller at (850) 375-0152  Name of Contact Person Area Code & Daytime Telephone Number                |
| Enclosed is a check for the following amount made payable to the Florida Department of State:              |
| \$35 Filing Fee  |

### **Mailing Address**

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

### Street Address

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

# **Articles of Amendment**

SECRETARY OF STATE

| Article  | to<br>es of Incorporation    | TALL                          | AHASSEE   | . FLURIDA         |
|--|------------------------------|-------------------------------|---|-------------------|
| anacinan Ibinta  | of TA                        | VE 712                        | મા 23 ા   | PM 3: 39          |
| (Name of Corporation as currently filed wi   | 1 / / / / C                  | <u> </u>                      | <u> </u>  |                   |
| (Name of Corporation as currently fried wi   | Territa Dep                  | i. oi State)                  |   |                   |
| P1100003   | <u> </u>                     |                               |   |                   |
| (Document Number of Corpo  | oration (if known)           |                               |   |                   |
| ursuant to the provisions of section 607.1006, Florida Status Articles of Incorporation:   | tes, this <i>Florida Pre</i> | ofit Corporation ado          | pts the follov  | ving amendment(s) |
| . If amending name, enter the new name of the corpora  | ition:                       | n/a                           |   | The new           |
| name must be distinguishable and contain the word "con<br>"Corp.," "Inc.," or Co.," or the designation "Corp.," "In<br>word "chartered," "professional association," or the abbrev | c," or "Co". A pr            |                               |   | abbreviation      |
| i. <u>Enter new principal office address, if applicable:</u><br>Principal office address <u>MUST BE A STREET ADDRESS</u>   |                              | n)a                           |   | <del>-</del>      |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  |                              | n/a                           |   | <del></del>       |
| If amending the registered agent and/or registered off<br>new registered agent and/or the new registered office  |                              | ida, enter the name           | of the  | _                 |
| Name of New Registered Agent   | n/a                          |                               |   |                   |
|  | lorida street address)       |                               |   |                   |
| New Registered Office Address:   |                              | , Florida                     | * 'sites s' 's de |                   |
|  | (City)                       |                               | (Zip Code)  |                   |
| New Registered Agent's Signature, if changing Registered hereby accept the appointment as registered agent. I am for   | d Agent:                     | rent the phlications          | of the nositio  | n                 |
| петеоу ассерт те аррошителя из гедізіегей иделі. Т йт зі   |                              | гері іне оондано <b>л</b> у ( | y ine positioi  | <b>.</b> .        |
| Signature of New Pea   | intered Accept if the        | maina                         |   |                   |

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.

| X Change                      | PT Jo                             | hn Doe          |                 |
|-------------------------------|-----------------------------------|-----------------|-----------------|
| X Remove                      | <u>V</u> <u>M</u>                 | ike Jones       |                 |
| X Add                         | <u>SV</u> <u>Sa</u>               | ally Smith      |                 |
| Type of Action<br>(Check One) | <u>Title</u>                      | Name            | <u>Addres</u> s |
| 1) Change                     | Nb                                | Burn Yourships, | 1006 Patrot P   |
| Add                           |                                   | <u> </u>        | Pensacola, FL   |
| Remove                        |                                   |                 | 32534           |
| 2) Change                     |                                   |                 |                 |
| Add                           |                                   |                 |                 |
| Remove                        |                                   |                 |                 |
| 3) Change                     |                                   |                 |                 |
| Add                           |                                   |                 |                 |
| Remove                        |                                   |                 |                 |
| 4) Change                     | Approximate and the second second |                 |                 |
| Add                           |                                   |                 | AP-1-2          |
| Remove                        |                                   |                 |                 |
| 5) Change                     |                                   |                 |                 |
| Add                           |                                   |                 |                 |
| Remove                        |                                   |                 |                 |
| 6) Change                     |                                   |                 |                 |
| Add                           |                                   |                 |                 |
| Remove                        |                                   |                 |                 |

| If amendin<br>( attach add | g or adding additional Articitional sheets, if necessary). | cles, enter change(s)<br>(Be specific)         | <u>here</u> :                                |                              |
|----------------------------|--|--|--|------------------------------|
| 5,0                        | xa share   | 5055   | ock ou                                       | ned by                       |
| <u>Ś</u>                   | orn Yours  | Ships, J                                       | rc. We                                       | re                           |
| tra                        | nsferred   | on 7-  | 13-12 to                                     | o Debra                      |
| 5, )                       | miller, m  | naking   | 1 M5.  | miller                       |
| 10                         | 0% ON/r  | ier of   | Ameni  | cah                          |
| Her                        | Hage Tol   | WS. Ir   | $\mathcal{C}$ .                              |                              |
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|                            |  |  |  |                              |
| provisions                 | dment provides for an exch<br>s for implementing the amer  | ange, reclassification<br>idment if not contai | n, or cancellation of<br>ned in the amendmen | issued shares,<br>at itself: |
| (if not                    | applicable, indicate N/A)                                  | h./ 15   | 10011  | M%                           |
| 117                        | media  | 1000   | $\sqrt{N}$                                   | <u> </u>                     |
| Oy                         | med by<br>see abo  | 120  | V O, 1,                                      | (1) / (C):                   |
| <del></del>                | SEE abo  | 1/E)   | ·  |                              |
|                            |  |  | ·  |                              |
| , - <u></u>                |  |  |  |                              |
|                            |  |  |  |                              |
|                            |  |  |  |                              |
|                            |  |  |  |                              |

| The date of each amendment(s) adoption: 7-13  | -12  |
|---|--|
| Effective date if applicable: 7-13  | -12  |
| (no more than   | n 90 days after amendment file date)   |
|   |  |
| Adoption of Amendment(s) (CHECK ONE)  |  |
| The amendment(s) was/were adopted by the shareholders. The shareholders was/were sufficient for approval.             | The number of votes cast for the amendment(s)  |
| ☐ The amendment(s) was/were approved by the shareholders a must be separately provided for each voting group entitled |  |
| "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 direct action was not required.                                   | ors without shareholder action and shareholder   |
| ☐ The amendment(s) was/were adopted by the incorporators vaction was not required.                                    | rithout shareholder action and shareholder   |
| Dated 7-15-12   | <u> </u>   |
|   | fficer – if directors or officers have not been the hands of a receiver, trustee, or other court ry) |
| Debra   | 5. Miller  |
| (Typed or print   | ed name of person signing)   |
| Pros  | ident  |
| (Title of per   | son signing)   |