P11000085930

(Re	equestor's Name)	- ·
(Ad	dress)	
(Ad	ldress)	
(Cit	y/State/Zip/Phone	e #)
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11 DEC 19 AM 10: 04

Amend Newis 12-21-11

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR		TRAVEL AGEN	ICY INC	
DOCUMENT NUME	BER: P1100008593	30		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.		
Please return all corres	pondence concerning this ma	tter to the following:		
	ANASTASCIA R	AMSEY		
•		Name of Contact Perso	n	
	KINGDOM TRAV	EL AGENCY IN	IC	
•		Firm/ Company		
	PO BOX 97			
•		Address	· · · · · · · · · · · · · · · · · · ·	
	BOYNTON BEAC	CH FL 33425		
•	·	City/ State and Zip Cod	e	
KIN	GDOMTRAVEL.	AGENT@GMAII	COM	
IXII		sed for future annual report		
		ou io iuiuio uibiuui iopoii	nomento,	
For further information	concerning this matter, pleas	se call:		
ANASTASCIA	A RAMSEY	at (561	3287494	
Name o	f Contact Person		de & Daytime Telephone Number	
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:	
□ \$35 Filing Fee	\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is	□\$52.50 Filing Fee Certificate of Status Certified Copy	
	enclosed)	(Additional C		
			is enclosed)	
Mailing Address		Street	Address	
Amendment Section		Amendment Section		
	ion of Corporations		n of Corporations	
	Box 6327	Clifton Building		
Tallahassee, FL 32314		2661 Executive Center Circle		
		Tallaha	issee, FL 32301	

Articles of Amendment to Articles of Incorporation of

11 DEC 19 AM 10: 04

-SECNETARY OF 5 LATE KINGDOM TRAVEL AGENCY INC TALLAHASSEE FLURIDA (Name of Corporation as currently filed with the Florida Dept. of State) P11000085930 (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 corporation: 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." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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: ANASTASCIA RAMSEY Name of New Registered Agent 1022 PINE CIRCLE (Florida street address) Florida 33463 GREENACERS New Registered Office Address: (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.

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	<u>PT</u> John	n Doe	
X Remove	<u>V</u> <u>Mik</u>	e Jones	
X Add	<u>SV</u> <u>Sall</u>	<u>y Smith</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
I) X Change Add Remove	PST	ANASTASCIA RAMSEY	PO BOX 97 BOYNTON BEACH FL, 33425
2) Change Add Remove	VP	ANTHONY S MAYS	
3) Change Add Remove	•		
4) Change Add Remove			
5) Change Add Remove			
6) Change Add Remove			

ttach additional sheets, if necessary).	rticles, enter (. (Be specif	ic)	:-		
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					•
			. ,		

amendment provides for an exchai	nge, reclassifi	cation, or can	cellation of iss	ued shares, nt itself:	
rovisions for implementing the am (if not applicable, indicate N/A)		ot comanico n			
rovisions for implementing the am		or contamed i			
rovisions for implementing the am					
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provisions for implementing the am					

The date of each amendment(s) ac	12/15/2011
Effective date <u>if applicable</u> :	(
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
■ The amendment(s) was/were ado by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.
	proved by the shareholders through voting groups. The following statement 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 ado action was not required.	pted by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/were ado action was not required.	pted by the incorporators without shareholder action and shareholder
_{Dated} 12/15/2	2011
Signature ANA	STASCIA RAMSEY Ingrition Com
(By a di selected	rector, president or other officer – if directors or officers have not been l, by an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)
	ANASTASCIA RAMSEY
•	(Typed or printed name of person signing)
	PRESIDENT
·	(Title of person signing)