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Amend



COVER LETTER

TO:	Amendment Section	
	Division of Corporation	s

NAME OF CORPORATION: MIGMI FINGST TRUVEL, INC.
DOCUMENT NUMBER: 413000004081
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Name of Contact Person MILHI FIVEST TRAVEL TILE Firm/Company P.O. BOX 14080C Address Coral Guoll H 3314 City/State and Zip Code E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
TUM TOUS Upc7 at (305) 454-1519 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 Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed) Certified Copy (Additional Copy is enclosed)
Mailing Address Street Address

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

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

Articles of Amendment	
Articles of Incorporation	
Articles of Amendment to Articles of Incorporation of 13 FEB 28 PM 12: (Name of Corporation as currently filed with the Florida Dept. of State) ALLAHASSFE, FLORIS (Document Number of Corporation (if known)	37.
(Name of Corporation as Currently life with the Florida Dept. of State ALLAHASST OF STATE	- 4
(Document Number of Corporation (if known)	<u>.</u>
(Bottoment Number of Corporation (if known)	4
Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following at its Articles of Incorporation:	nendment(s) to
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 abbr	ie new
"Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must con 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 MAYBE 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:	
Name of New Registered Agent	
(Florida street address)	
New Registered Office Address: , Florida ,	
(City) (Zip Code)	
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	
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.

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) Change	<u>S</u>	Dixie F. Lopez	P.O.DOX 146806
X Add		`	Coral Guberti
Remove			33114
2) Change			
Add			
Remove			
3)Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Pamaua			

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E. If amending or adding additional Article (Attach additional sheets, if necessary). (Attach additional sheets)	s, enter change(s) here:	
(Audeli diddiwidi sheets, y necessary).	De specific)	
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	<u> </u>	
	ge, reclassification, or cancellation of issued shares,	
	ment if not contained in the amendment itself:	
(if not applicable, indicate N/A)		
		

The date of each amendment(s) adoption:
· ·
Effective date if applicable: (no more than 90 days after amendment file date)
Adoption of Amendment(s) (CHECK ONE)
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast 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 02 25 3
Signature
(By a director, president or other or ficer – if directors or officers have not been selected, by an incorporator – Kin the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciars)
(Typed or printed name of person signing)
(Title of person signing)