## P13000017319

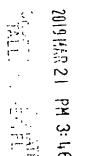
(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone #	)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Name	)
(Do	cument Number)	
Certified Copies	_ Certificates o	f Status
Special Instructions to	Filing Officer:	

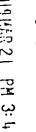
Office Use Only



900326381829

03/21/19--01014--002 \*\*43.75







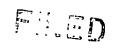
 $F(\mathbb{C}[X], \mathbb{C}[X])$ 

## COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORAT	ION: Tickets Made Easy	. Inc.	
DOCUMENT NUMBER	P13000017319		
The enclosed Articles of A	mendment and fee are su	bmitted for filing.	
Please return all correspon-	dence concerning this ma	tter to the following:	
Dav	id A James		
-		Name of Contact Persor	1
	<u> </u>	Firm/ Company	
520	Mandalay Road		
		Address	
Orla ——	ando, FL 32809		
		City/ State and Zip Code	
Andy@flo	oridadolphintours.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further information cor	neerning this matter, pleas	se call:	
Davd A James		at ( <u>407</u>	509-0067
Name of Co	ontact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for the	following amount made	payable to the Florida Depa	ortment of State:
□ \$35 Filing Fee	S43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fcc Certificate of Status Certified Copy (Additional Copy is enclosed)
Amenda Division P.O. Bo	Address ment Section tof Corporations x 6327 sec, FL 32314	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building executive Center Circle ussee, FL 32301

## Articles of Amendment to Articles of Incorporation



2019 KAR 21 PM 3: LE Tickets Made Easy. Inc. (Name of Corporation as currently filed with the Florida Dept. of State) P13000017319 (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: The new 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: Name of New Registered Agent (Florida street address) New Registered Office Address: 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:

 $P = President; V \neq Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office hold. President, Treasurer, Director would be PTD.$ 

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	PT	John Doc		
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	P/D	David A James		5495 S Orange Blossom Trail
Add	<del>-</del>			Orlando, Fl. 32839
X Remove				
2) Change	P	Declan Robert Sinr	nott-James	520 Mandalay Road
x Add				Orlando, FL 32809
Remove				
3) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Chausa				
5) Change		<del></del>		<u></u>
Add				
Remove				
6) Change	·····			
Add				
Remove				

2. If amending or adding additional Articl	es, enter change(s) here:
(Attach additional sheets, if necessary).	(Be specific)
11/0	
- $NA$	
<b>,</b>	
Han amendment provides for an excha-	nge, reclussification, or cancellation of issued shares,
provisions for implementing the amend	dment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
N	
N/A	
7	

	ary 1, 2018	20.3
The date of each amendment(s) adoption: date this document was signed.		, if other than the
January 1, 2018		
Effective date <u>if applicable</u> :		
ſ	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not document's effective date on the Department of St	meet the applicable statutory filing requirements, tate's records.	this date will not be listed as the
Adoption of Amendment(s) (CHE)	CK ONE)	
The amendment(s) was/were adopted by the shareholders was/were sufficient for app	nareholders. The number of votes cast for the amen proval.	dment(s)
	shareholders through voting groups. The following roup entitled to vote separately on the amendment	
"The number of votes cast for the amenda	ment(s) was/were sufficient for approval	
bv	ng group)	
Coting	g group)	
☐ The amendment(s) was/were adopted by the boaction was not required.	oard of directors without shareholder action and sha	ıreholder
☐ The amendment(s) was/were adopted by the incaction was not required.	corporators without shareholder action and shareho	older
Dated	3 18 19	
Signature		
	ent or other officer - if directors or officers have no	ot been
	porator - if in the hands of a receiver, trustee, or other	her court
appointed fiduciary b	y that fiduciary)	
Davi	ID JAMES	
(T <sub>2</sub>	yped or printed name of person signing)	
	P/ D	
<del>_</del>	(Title of person signing)	