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15 APR 13 AN 10: 51

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COVER LETTER

TO: Amendment Section Division of Corporations 15 Iravel Work 3 Study oversea one corporation. DOCUMENT NUMBER: \$13000 0 70067 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Daqueline Srown
Name of Contact Person US Travel work 3 Study averses one Corporation. Selbe Court Orlando, Fl, 3281
City/ State and Zip Code US wark and trouch @ Yahoo.com
ail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (407) 952-7237 Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: **2** \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy

enclosed)

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

(Additional Copy is enclosed)

ATTICLE STATE

Articles of Amendment to Articles of Incorporation

15 APR 13 AM 10:51

INT I III	of
US Inquel Work 35tu	dy Overseal one Conferation
(Name of Corporation as currently file	
P13 acco	
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Pursuant to the provisions of section 607.1006, Florida S its Articles of Incorporation:	Statutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corp	poration:
	The new
	"corporation," "company," or "incorporated" or the abbreviation "Inc," or "Co". A professional corporation name must contain the bbreviation "P.A."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDR	<u>PESS</u>)
	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered new registered agent and/or the new registered of	
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Regist I hereby accept the appointment as registered agent. It	tered Agent: 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 Doe	
X Remove	<u>V</u> .	Mike Jones	
<u>X</u> Add			
	<u>SV</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	<u>V</u>	Marvin Smith	4516 N. Pine Hills Road
Add			Hills Road
Remove			Orlando Fl 32808
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	nding or adding additional additional additional sheets, if necessa	iry). (Be specij	îc)		
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lf an ai	mendment provides for an	exchange recla	ssification or ca	ncellation of issued	charas
provis	sions for implementing the	amendment if n			
(1)	f not applicable, indicate N/2	A)			
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The date of each amendment(s) adoption: _ date this document was signed.	4-13-15	15 APR 13 AH 10: 51.	if other than
Effective date if applicable:	(no more than 90 days after	amendment file date) St. San Dr.	
Adoption of Amendment(s) (C	HECK ONE)		
The amendment(s) was/were adopted by the by the shareholders was/were sufficient for	e shareholders. The number of approval.	votes cast for the amendment(s)	
The amendment(s) was/were approved by the must be separately provided for each voting			
"The number of votes cast for the ame	endment(s) was/were sufficient	for approval	
by			
(ve	oting group)		
The amendment(s) was/were adopted by the action was not required.			
The amendment(s) was/were adopted by the action was not required.	e incorporators without sharehol	der action and shareholder	
Dated 07/08/2 Signature Jacquel	10/5		
Signature Taxallel	ne Boouln		
(By a director, pre selected, by an inc	esident or other officer – if direct corporator – if in the hands of a ry by that fiduciary)		
Ja	quetien Br (Typed or printed name	aun	
	(1 yped or printed name	of person signing)	
	Owner		
	(Title of person	signing)	