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 Division of Corporations
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 Division of Corporations
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SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

F I L E D

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SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

R E C E I V E D

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**FLORIDA PROFIT/NON PROFIT CORPORATION
 CMR TRAVELS INC.**

| | |
|-----------------------|---------|
| Certificate of Status | 0 |
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FEDEX OFFICE 1736

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COVER LETTER**TO: Amendment Section
Division of Corporations****NAME OF CORPORATION: CMR TRAVELS INC.****DOCUMENT NUMBER: P13000056465**The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Imelda Vasquez

(Name of Contact Person)

Legalzoom.com, Inc.

(Firm/ Company)

100 W. Broadway Suite 100

(Address)

Glendale, CA 91210

(City/ State and Zip Code)

For further information concerning this matter, please call:

Imelda Vasquez

(Name of Contact Person)

at (323) 902-8800 x7450

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

 \$35 Filing Fee \$43.75 Filing Fee &
Certificate of Status \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) \$52.50 Filing Fee
Certificate of Status
Certified Copy
(Additional Copy
is 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

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FEDEX OFFICE 1736

FILED PAGE 07/09

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SECRETARY OF STATE
TALLAHASSEE, FLORIDAArticles of Amendment
to
Articles of Incorporation
of

CMR TRAVELS INC.

(Name of Corporation as currently filed with the Florida Dept. of State)

P13000056465

(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**)*

16813 SW 50th St

Miramar, FL 33027

C. Enter new mailing address, if applicable:

*(Mailing address **MAY BE A POST OFFICE BOX**)*

16813 SW 50th St

Miramar, FL 33027

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: _____

New Registered Office Address: _____ (Florida street address)

_____, Florida _____
(City) (Zip Code)

New Registered Agent's Signature, if changing Registered Agents:

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

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**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)**

| <u>Title</u> | <u>Name</u> | <u>Address</u> | <u>Type of Action</u> |
|--------------|-------------|----------------|--|
| _____ | _____ | _____ | <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove |
| _____ | _____ | _____ | <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove |
| _____ | _____ | _____ | <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove |

**E. If amending or adding additional Articles, enter change(s) here:
(attach additional sheets, if necessary). (Be specific)**

Article VII. The address of the following officers and directors shall be:

P. D - Sarah C. Roberts, 16813 SW 50th ST Miramar, FL 33027

T. S - Lonnie E. Roberts, 16813 SW 50th ST Miramar, FL 33027

D - Lonnie E. Roberts, 16813 SW 50th ST Miramar, FL 33027

**F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,
provisions for implementing the amendment if not contained in the amendment itself;
(if not applicable, indicate N/A)**

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The date of each amendment(s) adoption: 10/28/13

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

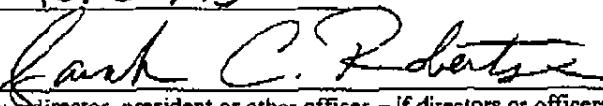
by _____"
(voting group)

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 10/30/13

Signature


(By a director, president or other officer – If directors or officers have not been selected, by an incorporator – If in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

Sarah C. Roberts

(Typed or printed name of person signing)

President

(Title of person signing)