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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: SUNSET DESTIN	ATIONS AND ADULT TO	OURS INC
DOCUMENT NUMB	ER:		
	f Amendment and fee are su	bmitted for filing.	
Please return all corresp	ondence concerning this ma	tter to the following:	
1	DARLENE RHODEN		
-		Name of Contact Persor	1
<u>.</u>	CENTER DESTINATIONS		
		Firm/ Company	
2	958 EAST SUNRISE BLVI) SUITE 2104	
-	•	Address	·
(ORAL RIDGE , FLORIDA	33304	
_		City/ State and Zip Code	
ı	NFO@SUNSETDESTINAT	TONS.CA	
-	E-mail address: (to be us	sed for future annual report	notification)
For further information DARLENE RHODEN	concerning this matter, pleas		3001212
		at (416) System Talantan Namba
Name of	Contact Person	Area Co	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 enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Amer Divis P.O. 1	ng Address Idment Section Ion of Corporations Box 6327 hassee, FL 32314	Amend Divisio The Co	Address Iment Section on of Corporations entre of Tallahassee J. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

FILED

SUNSET DESTINATIONS AND ADULT TOURS INC

2020 OCT 23 PH 1: 28

	ly filed with the Florida Dept. of State.
P14(XXXX)2377	TALL AHASSEE, FL
(Document Number of	of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, this as Articles of Incorporation:	Florida Profit Corporation adopts the following amendmen
A. If amending name, enter the new name of the corporation:	
SUNSET DESTINATIONS AND EVENTS INC	The new
name must be distinguishable and contain the word "corporation," " "Inc.," or Co.," or the designation "Corp," "Inc," or "Co" "chartered," "professional association," or the abbreviation "P.A.	company," or "incorporated" or the abbreviation "Corp.," A professional corporation name must contain the word
3. Enter new principal office address, if applicable:	2958 EAST SUNRISE BLVD SUITE 2104
Principal office address <u>MUST BE A STREET ADDRESS</u>)	CORAL RIDGE , FLORIDA 33304
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>)	
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address Name of New Registered Agent	
(Plorida st	rvet address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent hereby accept the appointment as registered agent. I am familiar	
Signature of New F	Registered Agent, if changing
Check if applicable	
The amendment(s) is/are being filed pursuant to s. 607.0120 (11)	(a) E C

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)

Example:

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	<u>V</u>	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	SAJENOUR RI	HODEN	2958 EAST SUNRISE BLVD
X Add				SUITE 2104, CORAL RIDGE
Remove				FLORIDA 33304
2) Change				
Add				
Remove Change			···	
Add				
Remove				
4) Change				
Add				
Remove				
5) Change			·	
Add				
Remove				
6) Change				
Add				
Remove				

(Attach <i>a</i>	ling or adding additional sheets, if necess	ary). (Be specif	fic)			
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	·····					
				_		
			_ -		•	
						
'. <u>If an am</u>	endment provides for a	n exchange, recla	ssification, or ca	ncellation of issu	ed shares,	
provisio	ons for implementing th	<u>e amendment if r</u>	ot contained in	the amendment is	tself:	
(1) 1	ot applicable, indicate N	Z-E)				
					_	
· · · · ·			 -			

date this document was signed.	
Effective date <u>if applicable</u> :	
	(no more than 90 days after amendment file date)
Note: If the date inserted in this blocument's effective date on the De	ck does not meet the applicable statutory filing requirements, this date will not be listed as tartment of State's records.
Adoption of Amendment(s)	(CHECK ONE)
■ The amendment(s) was/were ado action was not required.	led by the incorporators, or board of directors without shareholder action and shareholder
☐ The amendment(s) was/were ado by the shareholders was/were su	ied by the shareholders. The number of votes cast for the amendment(s) icient for approval.
must be separately provided for	oved by the shareholders through voting groups. The following statement arch voting group entitled to vote separately on the amendment(s):
	or the amendment(s) was/were sufficient for approval
not applicable by	
	(voting group)
OCT 20, 20 Dated Signature	
	ector, president or other officer - if directors or officers have not been
	by an incorporator – if in the hands of a receiver, trustee, or other court
appoint	fiduciary by that fiduciary)
	ARLENE RHODEN
	(Typed or printed name of person signing)
	EO

(Title of person signing)