MAR/11/2015/WED 10:05 AM

3/11/2015



Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H15000061692 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this. page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : EXPRESS CORPORATE FILING SERVICE INC.

Account Number : 120000000146 Phone : (305)444-4994 Fax Number : (305)444-4977

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

COR AMND/RESTATE/CORRECT OR O/D RESIGN WATO TOUR, INC

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$35.00

MAR 1 2 2015

Electronic Filing Menu

Corporate Filing Menu

C. CARRIOTHERS

	三部 5
Articles of Amendment	
to Articles of Incorporation	<u>}₹</u> ∑ =
of	<i>(i), 7</i> ← ← ← ← ← ← ← ← ← ← ← ← ← ← ← ← ← ←
WATO TOUR, INC	
(Name of Corneration as currently filed with the Florida Dept. of State)	<u></u> 0
P15000010818	
(Document Number of Corporation (if known)	» w
Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the foliate Articles of Incorporation: A. If amending name, enter the new name of the corporation:	llowing amendment(s) to
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name word "chartered," "professional association," or the abbreviation "P.A." B. Enter new orincipal office address. if synlicable: (Principal office address MUST RE A STREET ADDRESS)	The new the abbreviation must contain the
C. Enter new mailing address, if applicable: (Mailing address MAY RE 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 Aceni	
(Florida street address)	
New Registered Office Address: Plorida	
(City) (Zip Cod	(e)
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 posit	
	IOA.
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, Saily Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Saily Smith, SV as an Add.

Example: X Change	<u>PT</u>	John Do	<u>oe</u>	
X Remove	¥	Mike Jo	nes .	
X Add	<u>sv</u>	Selly Sr	nìth	
Type of Action (Check One)	<u>Tide</u>		Name	Address
1) Change	VP	_	SIMONE ARAUJO	1756 N. BAYSHORE DR.
MAN .				SUITE 20J
Remove				MIAMI, FL 33132
2) Change		_		
Add			•	
Remove				
3) Change				
Remove				
4) Change		_		
Add				
Remove				
5) Change			•	Nythis Wasserstein Committee Committ
Add				
Rеллоvе				
6) Change		_		
Add				
Remove				

second continues are and d	icles, enter chapper(s) bere: (Be specific)
<u>If an appendiment provides for an each</u>	hange, reclassification, or cancellation of issued thates, endurent if not contained in the amandment itself:
provisions for implementing the ame (if not applicable, indicate N/A)	inducest it has charactered to the minabilities to tree!!
provisions for implementing the ame (if not applicable, indicate N/A)	ENGREEN II IN CEMENTACH IN INC MINAMPHOENE INSELL
provisions for implementing the ame (if not applicable, indicate N/A)	EGREST II IN CENCETTE IN THE BURNING HEST
provisions for implementing the ame (if not applicable, indicate N/A)	ENGINEER II IN CENCETACT IN 18C STRANGINGERS INVEST
provisions for implementing the ame (if not applicable, indicate N/A)	EQUERT II IN CENCILICA II IBC BIRANDIREN INCELL
provisions for implementing the ame (if not applicable, indicate N/A)	
provisions for implementing the sine (if not applicable, indicate N/A)	enguent if two concerned in use smanniness reserve

date this document was signe	nt(s) adoption; 03/10/2015 id.	, if other than the
Effective date if applicable:		_
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/w by the shareholders was/v	ere adopted by the shareholders. The number of votes east for the amendment(s) were sufficient for approval.	
	ere approved by the shareholders through voting groups. The following statement ded for each voting group entitled to vote separately on the amendment(s):	
"The number of vote	es cast for the amendment(s) was/were sufficient for approval	
ьу	(vaiting group)	
	(voting group)	
The amendment(s) was/we action was not required.	ere adopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/we action was not required.	ere adopted by the incorporators without shareholder action and shareholder	
Dated 03/	10/2015	
Signature	i Amm.	
5	By a director, president or other officer + if directors or officers have not been selected, by an incorporator - if in the hards of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	_
	OSMAR A. DA COSTA	
	(Typed or printed name of person signing)	_
	PRESIDENT	
	(Title of person signing)	_