P15000056594

(Re	equestor's Name)	
(Ac	ddress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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(Do	ocument Number)	
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SECRETARY OF STATE
ALLAHASSEE, FLORIDA

JUL 1 6 2015 T CANNON

COVER, LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORA	ATION: VARADERO TRA	AVEL & MULTISERVICE	S INC
DOCUMENT NUMBE			
The enclosed Articles of	Amendment and fee are su	bmitted for filing.	
Please return all corresp	ondence concerning this ma	tter to the following:	
τ	NERBIA IGARZA		
		Name of Contact Person	1
,	ARADERO TRAVEL & N	MULTISERVICES INC	
_		Firm/ Company	
3	780 KORI RD		
_		Address	
J	ACKSONVILLE, FL 3225	7	
_		City/ State and Zip Cod	e
varade	otravelagency@gmail.com		
		sed for future annual report	notification)
		,	·····,
For further information	concerning this matter, pleas	se call:	
INERBIA IGARZA		904 at () 514-8818
Name of	Contact Person		de & Daytime Telephone Number
Enclosed is a check for t	he 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)
<u>Maili</u>	ng Address	Street	Address
	dment Section		lment Section
	on of Corporations		on of Corporations
	Sox 6327		Building
Tallah	assee, FL 32314	2661 E	executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

VARADERO TRAVEL & MULTISERVICES INC

P15000056594	ntly filed with the Florida Dept. of State)	
	of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, thi its Articles of Incorporation:	is Florida Profit Corporation adopts the following	lowing amendment(s) to
A. If amending name, enter the new name of the corporation: N/A		The man
name must be distinguishable and contain the word "corporate "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name i	The new the abbreviation must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	N/A	
		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A	
		15 SE
D. If amending the registered agent and/or registered office ad- new registered agent and/or the new registered office addre		JU CAR
Name of New Registered Agent N/A		FIL TARY IASSI
(Florida s	treet address)	T: SE
	. Florida	- 12 - 12
New Registered Office Address:		

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 <math>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	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	MGR	ALAEN FLEITAS VALDES	10263 Whispering Forest Dr #118
X Add	-	_	Jacksonville, FL 32257
Remove			
2) Change	<u></u>		
Add			
Remove			
3)Change		_	NL U
Add			JUL ARETA
Remove			5 PH 5
4) Change			STAT
Add			2 UE A
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary).	(Be specific)		
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		5	N
		JUL	<u> </u>
			in
		ហ	ת: תי
		PH	· ·
f an amendment provides for an exc	hange, reclassification, or cancellation of issued shares,	Ē.	-
provisions for implementing the am	endment if not contained in the amendment itself:		ž
(if not applicable, indicate N/A)		12	5
•			
		·	

date of each amendment(s) adoption:	, if other than th
e this document was signed.	
Effective date if applicable: (no more than 90 day	rys after amendment file date)
Note: If the date inserted in this block does not meet the applicable document's effective date on the Department of State's records.	statutory filing requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The numby the shareholders was/were sufficient for approval.	nber of votes cast for the amendment(s)
The amendment(s) was/were approved by the shareholders through must be separately provided for each voting group entitled to vote	
"The number of votes cast for the amendment(s) was/were suf	fficient for approval
by	"
(voting group)	·
☐ The amendment(s) was/were adopted by the board of directors with action was not required.	nout shareholder action and shareholder
☐ The amendment(s) was/were adopted by the incorporators without s action was not required.	(T) - C
03 12 15	PA FOR
Dated 07-12-15	LORI COR
Signature	~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~
(By a director, president or other officer — selected, by an incorporator — if in the han appointed fiduciary by that fiduciary)	
INERBIA IGARZA	
(Typed or printed name	e of person signing)
PRESIDENT	
(Title of pe	erson signing)