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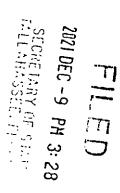
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: CRUISE MAN	AGEMENT INTERN	ATIONAL, INC.			
DOCUMENT NUMBER: P15000067960					
The enclosed Articles of Amendment and fee are su	ibmitted for filing.				
Please return all correspondence concerning this ma	tter to the following:				
William B. Milliken, Esq.					
	Name of Contact Person	<u> </u>			
Horr, Novak & Skipp,					
	Firm/ Company				
Two Datran Center, S	uite 1700 9130 S. D	adeland Blvd.			
100 30.00.1	Address				
Miami, Florida 33156					
	City/ State and Zip Cod	e			
wmilliken@admiral-law.	com				
	sed for future annual report	notification)			
Cartisthas intermedian appropriate this parties, place	es adl:				
For further information concerning this matter, plea	se can.				
William B. Milliken, Esq.	at (305	670-2525			
Name of Contact Person	A rea Co	de & Daytime Telephone Number			
Enclosed is a check for the following amount made	payable to the Florida Dep	artment of State:			
☑ \$35 Filing Fee	S43.75 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	Amend Division The C 2415 i	Address Iment Section In of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303			

Articles of Amendment to Articles of Incorporation

FILED

2021 DEC -9 PH 3: 29

CRUISE MANAGEMENT INTERNATIONAL, INC.	SECRETARY OF STATE
(Name of Corporation as current)	ly filed with the Florida Dept. df State
P15000067960	
(Document Number of	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation," "or "Inc.," or Co.," or the designation "Corp." "Inc," or "Co". A "chartered," "professional association," or the abbreviation "P.A."	company," or "incorporated" or the abbreviation "Corp.," A professional corporation name must contain the word
B. Enter new principal office address if applicable: (Principal office address MUST BE A STREET ADDRESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered office addinew registered agent and/or the new registered office address Name of New Registered Agent	
(Florida sir	reat address)
New Registered Office Address.	, Florida(Zip Code)
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar to	<u>t:</u> with and accept the obligations of the position.
Sonature of New F	Registered Agent, if changing
·	regiones en la genta, transmissimo
Check if applicable	

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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	D	Niels-Erik Lund	4770 Biscayne Blvd.
Add			PH-D
X Remove			Miami, Florida 33137
2) Change	D	Dan Tindall	4770 Biscayne Blvd.
X Add			PH-D
Remove 3) Change			Miami, Florida 33137
Add			· · · · · · · · · · · · · · · · · · ·
Remove			
4) Change			<u> </u>
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	sheets, if necessary	<u>articles, enter change</u> /). (Be specific)			
					
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The date of each amendment(s) adoption: July 1, 2021	, if other than the
date this document was signed.	
Effective date if applicable: July 1, 2021	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not document's effective date on the Department of State's records.	ot be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☑ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shaction was not required.	areholder
☐ 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)	
Dated November 29, 2021 Signature W A M	
(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)	
William B. Milliken	
(Typed or printed name of person signing)	
Secretary	
(Title of person signing)	