P16000012539

(Re	equestor's Name)			
(Ad	idress)			
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(Cir	ty/State/Zip/Phone #	<i>‡</i>)		
PłCK-UP	☐ WAIT	MAIL		
(Bı	ısiness Entity Name)		
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SECRETARY OF STATE

MAR 1 6 2016 C. CARROTHERS

COVER LETTER

TO: Amendment Section Division of Corporations
NAME OF CORPORATION: Universal Resorts and tours, Incomment number: P16000012539
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Scott Schneider Name of Contact Person Universal Resort and Tours, Inc Firm/Company 7491 N. Federal Huy Suite C5-186 Address Boca Raton FL 33497 City/State and Zip Code
Scotts @ Undercover Surveillance - US E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Scott Schneiler at (954) 553-2761 Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed) Certified Copy (Additional Copy is enclosed)
Mailing Address Street Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment

to

Articles of Incorporation

of

Universal Resorts	s and Jours, Inc
(Name of Corporation as current)	y filed with the Florida Dept. of State)
<u> </u>	
(Document Number o	f 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 "corporatio "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "word "chartered," "professional association," or the abbreviation "B. Enter new principal office address, if applicable:	'Co". A professional corporation name must contain the
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	Suite C5-186 FG ITTE Boch Raton, FL 35487
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	7491 N. Feleral Huy Suite C5-186 Boca Raton, FL 33487
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address	
Name of New Registered Agent Stoth Sc	h neider
	Feleral Huy Svite C5-186
New Registered Office Address: BOCn Raton	(City), Florida 33487 (Zip Code)
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar to	with and accept the obligations of the position.
Signature of New F	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, 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: <u>X</u> Change	<u>PT</u>	John D	<u>oe</u>	
X Remove	<u>v</u>	Mike J	<u>ones</u>	
X Add	<u>sv</u>	Sally S	<u>mith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change	Coc	<u> </u>	Catherine Scher	6047 Kimberly Bluk
Add Remove				Svite 5 North Landerdale, FL 33068
2) Change	CF	Q	Adam Scher	6047 Kimberly Blue
Add				Svite 5 North Lauderdale, FL
3) Change Add	<u>CEC</u>	2	Scott Schneider	7491 N. Federal Hmy 33068 Suite C5-186
Remove				Bocn Raton, FL 33487
4) Change		_		
Add				
5) Change		_		
Add Remove				
6) Change		_		
Add				
Remove				

E. If amending or adding additional (Attach additional sheets, if necessa	Articles, enter chary). (Be specific)	ange(s) here:			
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If. 1				_	
If an amendment provides for an provisions for implementing the	<u>exchange, reclassi</u> amendment if not	lication, or cance contained in the	<u>ellation of issued</u> amendment itsel	<u>shares,</u> f:	
(if not applicable, indicate N/A	f) / a			_	
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	7				
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The date of each amendment(s) adoption:	, if other than the
date this document was signed. Effective date if applicable: 3/7/16	
(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 dat document's effective date on the Department of State's records.	e will not be listed as the
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.	ı
☐ 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):	1 <i>t</i>
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by" (voting group)	
(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	
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)	
Scott Schneiler (Typed or printed name of person signing)	
(Typed or printed name of person signing)	
LEO_	
(Title of person signing)	