P160000 71830

(Re	equestor's Name)			
`	,			
(Address)				
(Ac	idress)			
(Ci	ty/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Bı	usiness Entity Nam	ne)		
(Do	ocument Number)			
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Special Instructions to	Filing Officer:			
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April 3, 2025

CELIO FONSECA 730 SW 78TH AVENUE SUITE 312 PLANTATION, FL 33324

SUBJECT: MAPIX TRAVEL COMPANY INC

Ref. Number: P16000071830

We have received your document for MAPIX TRAVEL COMPANY INC and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of a limited liability company must contain the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The following suffixes are no longer acceptable: "Limited Company," "L.C.," and "LC." The document accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

SHANTELL BROWN Regulatory Specialist II

Letter Number: 725A00007103

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	ATION: MAPIX TRAVEL	COMPANY IN	C			
DOCUMENT NUMBI	P16000071830			,	_	
The enclosed Articles of	f Amendment and fee are sul	bmitted for tiling	g.			
Please return all corresp	ondence concerning this ma	tter to the follow	ring:			
	CELIO FONSECA					
_		Name of Cor	tact Person		···	~2
	MAPIX TRAVEL COMPAN	NY INC.			ΞĞ	075
-		Firm/ Co	mpany			
7	30 SW 78TH AVE, SUITE	312			· • • · ·	26
_		Addi	ess			
Ī	PLANTATION, FLORIDA 3	3324-3480				222
-		City/ State ar	d Zip Code		 -	Ω ιλ
(CELIOJOSE@LIVE.COM				1 - 1	37
_	E-mail address: (to be us	sed for future an	nual report i	notification)	-	
For further information	concerning this matter, pleas	se call:				
CELIO FONSECA		at (_	561	_)		_
Name of Contact Person			Area Cod	le & Daytime Telephone N	lumber	
Enclosed is a check for	the following amount made	payable to the F	lorida Depa	rtment of State:		
■ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Fili Certified Co (Additional enclosed)	эру	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Amer Divis P.O.	ing Address indment Section ion of Corporations Box 6327 hassee, FL 32314		Amenda Division The Ce 2415 N	Address ment Section n of Corporations entre of Tallahassee I, Monroe Street, Suite 8 ssee, FL 32303	310	

Articles of Amendment to Articles of Incorporation of

34.5	DIX	TDA	WEL	COMP	ΔNV	INC
	TIA.	118.7	L V III		ALIN I	TENT.

(Name o	of Corporation as curren	tly filed with the Florida Dept. of	State)		
P16000071830					
	(Document Number	of Corporation (if known)			
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, this	s Florida Profit Corporation adopts	the followi	ng ame	ndment(s) to
A. If amending name, enter the new na	ame of the corporation:				
WE CONSTRUTORA & INCORPORA	DORA CORPORATION			The	new
name must be distinguishable and contain "Inc.," or Co.," or the designation "C "chartered," "professional association."	Sorp," "Inc," or "Co".	A professional corporation name		ion "Ce	np. "
B. Enter new principal office address,	730 SW 78TH AVE, SUITE 3	12 三角			
(Principal office address <u>MUST BE A STREET ADDRESS</u>)		PLANTATION, FLORIDA 3.	324-3480	26	· • · •
		1-561-654-1231	715°	P.3.	-
C. Enter new mailing address, if appl (Mailing address MAY BE A POST	19610 DINNER KEY DR	- 1 - 1	2: 56	· · ·	
		BOCA RATON, FLORIDA 33.	324-3480		
		1-561-654-1231			
D. If amending the registered agent ar new registered agent and/or the new Name of New Registered Agent	nd/or registered office ad w registered office addre CELIO FONSECA	dress in Florida, enter the name o	f the		
	730 SW 78TH AVE	-			
	(Florida s	treet address)		_	
New Registered Office Address:	PLANTATION		, Florida 33324-3480		
	(City)		(Zip Code)		
New Registered Agent's Signature, if of thereby accept the appointment as registered.	celio Fon	with and accept the obligations of	the position.		
	Signature of New	Registered Agent, if changing			
Check if applicable					

 \square 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)

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: X Change	<u>PT</u>	<u>John Doe</u>	
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	PSTD	NILTON G. MAZARIN	1280 SW 27TH AVE
Add			POMPANO BEACH, FL 33069
XRemove			
2) X Change	PSTD	CELIO FONSECA	730 SW 78TH AVE, SUITE 312
Add			PLANTATION, FL 33324-3480
Remove 3) Change	VP	WASHINGTON BRETAS	19610 DINNER KEY DR
X Add			BOCA RATON, FL 33498
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			<u> </u>
6) Change		<u> </u>	· · · · · · · · · · · · · · · · · · ·
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)
JUST A NAME CHANGE AND OWNERSHIP TRANSFER 100% TO CELIO FONSECA AND TO
REMOVE THE NAME OF Mr. MAZARIN OUT AND INCLUDING Mr. BRET AS AS A NEW VP.
Mr. CELIO FONSECA WILL THE OWNER OF 100% OF THE SHARES OF THE COMPANY.
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:
(if not applicable, indicate N/A)

	02/18/2025	
The date of each amendment(s)	adoption:	, if other than th
date this document was signed.		
0' Effective date <u>if applicable</u> :	7/01/2025	
Effective date <u>if applicable.</u>	(no more than 90	days after amendment file date)
Note: If the date inserted in this document's effective date on the l		able statutory filing requirements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were a action was not required.	dopted by the incorporators, or bo	oard of directors without shareholder action and shareholder
☐ The amendment(s) was/were a by the shareholders was/were		number of votes east for the amendment(s)
		ugh voting groups. The following statement ote separately on the amendment(s):
"The number of votes ca	st for the amendment(s) was/were	e sufficient for approval
by 02		
oy	(voting group)	
06/26/2	025	
Dated		
Signature	Celio Fonseca	
(By a selec		er – if directors or officers have not been hands of a receiver, trustee, or other court
	CELIO FONSECA	
	(Typed or printed n	ame of person signing)
	PRESIDENT / OWNER	
	(Title of person sign	ning)

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