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R. WELLE

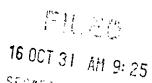
## **COVER LETTER**

TO: Amendment Section
Division of Corporations

NAME OF CORPO	RATION: TRAVELIO D.O.N	M. CORP	
DOCUMENT NUM	BER: P16000084397		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	espondence concerning this ma	tter to the following:	
	OSMEL MARTINEZ		
		Name of Contact Person	1
	TRAVELIO D.O.M. CORP		
		Firm/ Company	
	340 W FLAGLER ST APT 3		
		Address	
	MIAMI, FL, 33130		
		City/ State and Zip Cod	Α
		City/ State and Zip Cod	~
OSM	IEL@CUBACATION.NET		
	E-mail address: (to be us	sed for future annual report	notification)
	on concerning this matter, pleas		
MIRELYS REYNA		at (	9874434
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	or the 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)
Mailing Address Street Address		Address	
Amendment Section		Amendment Section	
Division of Corporations		Division of Corporations	
P.O. Box 6327		Clifton Building 2661 Executive Center Circle	
Tar	lahassee, FL 32314		assee, FL 32301
		ा वाशिया	10000, I L/ J2J01

## Articles of Amendment

## to Articles of Incorporation of



TRAVELIO D.O.M. CORP

(Name of Corporati	ion as currently	filed with the Florid	la Dept. of State).
16000084397			1.00
(Dogur	ment Number of (	Corporation (if know	n\
(Docui	nent Number of C	Corporation (II know	11)
ursuant to the provisions of section 607.1006, Florida Articles of Incorporation:	a Statutes, this Fi	lorida Profit Corpor	ation adopts the following amendmen
. If amending name, enter the new name of the co			
TRIPYA D.O.M	. CORF	<b>)</b>	The new
ame must be distinguishable and contain the wor Corp.," "Inc.," or Co.," or the designation "Corp ord "chartered," "professional association," or the	o," "Inc," or "C	'o". A professional	incorporated" or the abbreviation
Enter new principal office address, if applicable rincipal office address MUST BE A STREET ADD		<u> </u>	
. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<b>)Y</b> )		
(Maning dutiess MAT BE A TOST OF FICE BO	<u>'A</u> )		
. If amending the registered agent and/or registe		ss in Florida, enter	the name of the
new registered agent and/or the new registered	office address:		
Name of New Registered Agent			
<del> </del>	(Florida stree	et address)	
	(2 00/100 31/00	a unur city	
New Registered Office Address:			, Florida
	(0	City)	(Zip Code)
	·		,
ew Registered Agent's Signature, if changing Reginereby accept the appointment as registered agent.		ith and assent the ob	lications of the position
nereoy accept the appointment as registered agent.	ı am jamınar wi	ын апи ассері іне од	uganons of the position.
C:	nature of New Da	gistered Agent, if cho	TROIDO
Sign	idiare of trew Re	ды:ereu лдені, ij спо	ang mg

... 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	PT Jol	hn Doe	
X Remove	<u>V</u> <u>M</u> i	ike Jones	
X Add	<u>SV</u> <u>Sa</u>	lly Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) X Change	P	OSMEL MARTINEZ	340 W FLAGLER ST APT 3106
Add			MIAMI, FL, 33130
Remove			
2) X Change	S	MIRELYS REYNA	445 NW 4TH ST APT 1010
Add			MIAMI, FL, 33128
Remove			
3) Change			
Add			
Remove			<del></del>
4) Change			
Add			
Remove			
5) Change	*****		
Add			
Remove			
6)Change			
Add			
Remove			

	(Be specific)
-	
if an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, and and the amendment itself:
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and the amendment itself:
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and the amendment itself:
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and and the amendment itself:
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and the amendment itself:
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:

i ne dațe oi each amendment(s) adoption:	, ii other than the
date this document was signed.	
Effective date <u>if applicable</u> :  (no more than 90 days after amendment file date)	
(no more man 20 augs after amenament file unter	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date document's effective date on the Department of State's records.	ite 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.	s)
☐ 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):	?ni
"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.	er
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated 24/10/16	
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 course.)	rt
appointed fiduciary by that fiduciary)	
MIRELYS REYNA	
(Typed or printed name of person signing)	
P	

(Title of person signing)