P17000618304

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: GO TRAVEL ASS	SIST CORP	
DOCUMENT NUMB			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	JOSE KHAZAM		
-		Name of Contact Person	n
•	GO TRAVEL ASSIST COR	p	
-		Firm/ Company	
	5210 NW 83RD CT	Tima Company	
-		Address	
j	DORAL, FL. 33166		
-	, , , , , , , , , , , , , , , , , , , 	City/ State and Zip Cod	e
JOSEF	CHAZAM@GMAIL.COM		
	E-mail address: (to be us	sed for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
JOSE KHAZAM		at (305	de & Daytime Telephone Number
Name o	f Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:
\$35 Filing Fee	□\$43.75 Filing Fec & Certificate of Status	□\$43.75 Filing Fec & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Amer Divis P.O.	ing Address adment Section ion of Corporations Box 6327 hassee, FL 32314	Amend Divisio Clifton	Address Iment Section on of Corporations Building executive Center Circle

Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation of

/Nama				
(Ivame	of Corporation as curre	ntly filed with the Florida Dep	t. of State)	
P17000018304				
	(Document Number	r of Corporation (if known)		
Pursuant to the provisions of section 607 its Articles of Incorporation:	7,1006, Florida Statutes, th	nis <i>Florida Profit Corporation</i> a	dopts the following amendr	nent(s) to
A. If amending name, enter the new n	ame of the corporation:		The second	
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the desig word "chartered," "professional associa	nation "Corp," "Inc," or	r "Co". A professional corpor	The neThe neThe ne	on
B. Enter new principal office address (Principal office address MUST BE A.S.		N/A		-
	,	 		-
C. Enter new mailing address, if app (Mailing address MAY BE A POST		N/A		-
D. If amending the registered agent a new registered agent and/or the new Name of New Registered Agent			ne of the	
	(Elanida	street address)		
	(คางคนน			
New Revistered Office Address:	N/A	·	Florida N/A	
New Registered Office Address:	N/A	(City)	, Florida(Zip Code)	

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>	John Do	<u>oe</u>	
X Remove	$\underline{\mathbf{v}}$	Mike Jo	<u>enes</u>	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change			N/A	
Add				
Remove				
2) Change			N/A	
Add				
Remove				
3) Change		_	N/A	
Add				
Remove				• • • • • • • • • • • • • • • • • • • •
4) Change			N/A	
Add				
Remove				
5) Change		•	N/A	
Add				
Remove				
6) Change			N/A	
Add		_		
Remove				· · · · · · · · · · · · · · · · · · ·

E. If amending or adding additional Art (Attach additional sheets, if necessary).	(Be specific)
N/A	
· · _	
······································	
. If an amondment provides for an eval	hange verlessification or consulation of issued shows
provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself;
(if not applicable, indicate N/A)	
N/A	

The date of each amendment(s) adoption:	er than the
03/03/2017	
Effective date if applicable:	
(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 be lis document's effective date on the Department of State's records.	ted 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.	
☐ 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"	
by" (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. 	
03/03/2017	
Dated	
(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)	
JOSE M. KHAZAM KASSIS	
(Typed or printed name of person signing)	-
PRESIDENT	
(Title of person signing)	-