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COVER LETTER

Division of Corporations					
NAME OF CORPORATION: USA VACATIONS LUC					
DOCUMENT NUMBER: P1700006066					
The enclosed Articles of Amendment and fee are submitted for filing.					
Please return all correspondence concerning this matter to the following:					
Janelle Rotus					
USA Vacations INC.					
555 SW 12th Ave STE 120					
Pompano Beach FL 33069 City/State and Zip Code					
E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:					
Jarred Schuner = 561, 596-2131					
Name of Contact Person Area Code & Daytime Telephone Number \(^{\frac{1}{2}}\)					
Enclosed is a check for the following amount made payable to the Florida Department of State.					
\$35 Filing Fee Certificate of Status Certified Copy Certified Copy (Additional copy is enclosed) \$35 Filing Fee Certified Copy (Additional Copy is enclosed)					
Mailing Address Street Address Amendment Section Amendment Section					

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Division of Corporations Clifton Building

Tallahassee, FL 32301

2661 Executive Center Circle

Articles of Amendment

FILED

to
Articles of Incorporation

2018 OCT 15 PM 3: 44 tion as corrently filed with the Florida Dept. of State) (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." 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 address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New 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: XChange	PT Jo	ohn Doe	
X Remove	<u>V</u> <u>M</u>	fike Jones	
<u>X</u> Add	<u>sv</u> s	ally Smith	
Type of Action (Check One) 1) Change	Title	Kevin Skolnick	Address 7700 NW 79th
Add Remove 2) Change Add	<u>p</u>	Janelle Rojas	Ave Apt Eb Tamarac, FL 33321 625 NE 8th Ave Unit 1, Fort Lauderdule
Remove 3)ChangeAddRemove			FL. 33304
4) Change Add Remove			
5) Change Add			
Remove 6)ChangeAddRemove			

Attach additional sheets, if necessary).	ticles, enter change(s) here: (Be specific)	
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f an amandmant provides for an each	hange, reclassification, or cancellation of issued shares,	
provisions for implementing the ame	endment if not contained in the amendment itself:	
(if not applicable indicate MIA)		
(if not applicable, indicate N/A)		
(у посиррисате, таксие 1974)		- .
(у погаррисане, такан 1974)		
(y not appueante, inaicate iviA)		
(у пот аррисате, таксие 197А)		
(ij noi appuvame, inaicate iviA)		
(ij mii appiicame, inaicate (VIA)		
(у то аррикате, такан 1914)		

The date of each amendment(s) adoption:	<u>. </u>	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :	more than 90 days after amendment file date)	
(no	more than 90 days after amendment file date)	
Note: If the date inserted in this block does not me document's effective date on the Department of State	eet the applicable statutory filing requirements, this date will strecords.	III not be listed as the
Adoption of Amendment(s) (CHECK	ONE)	
The amendment(s) was/were adopted by the sharel- by the shareholders was/were sufficient for approve	holders. The number of votes cast for the amendment(s) val.	
	cholders through voting groups. The following statement p entitled to vote separately on the amendment(s):	
"The number of votes cast for the amendmen	• •	
by(voting gr		
(voting gr	roup)	
☐ The amendment(s) was/were adopted by the board action was not required.	of directors without shareholder action and shareholder	
☐ The amendment(s) was/were adopted by the incorpaction was not required.	porators without shareholder action and shareholder	
Dated	8	
Signature	or other officer – if directors or officers have not been	
	tor – if in the hands of a receiver, trustee, or other court	
appointed fiduciary by th		
ر۔	ANTELIE PZOJAS	
(Турс	d or printed name of person signing)	.
	PPES DENT (Title of person signing)	
	(Title of person signing)	_

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