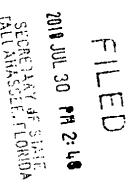
P17000092282

(i	Requestor's Name)
(/	Address)
(,	Address)
(1	City/State/Zip/Phone #)
PICK-UP	☐ WAIT ☐ MAIL
(1	Business Entity Name)
	Document Number)
Certified Copies	Certificates of Status
Special Instructions	to Filing Officer:



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JUL 3 1 2018
I ALBRITTON

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPOR	RATION: Diversity Travel, I	ne.	
DOCUMENT NUME			
	of Amendment and fee are su	bmitted for filing.	
Please return all corres	spondence concerning this ma	tter to the following:	
	Edward Shaw		
		Name of Contact Person	n
	Diversity Travel, Inc.		
		Firm/ Company	
	808 NW 13th Street		
		Address	
	Gainesville, FL, 32601		
		City/ State and Zip Cod	e
.who	@diversitytravel.com		
Csilaw	•	sed for future annual report	notification)
	17 man address, (to be da	sed for ractic annual report	normeanony
For further information	concerning this matter, pleas	se call:	
Robert Todd		at (352	371 3100
Name c	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	ortment of State:
S35 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 Amendment Section Division of Corporations P.O. Box 6327		Amend Divisio	Address Iment Section on of Corporations Building
Tallahassee, FL 32314		2661 Executive Center Circle	

Tallahassee, FL 32301



July 24, 2018

EDWARD SHAW DIVERSITY TRAVEL, INC. 808 NW 13TH STREET GAINESVILLE, FL 32601

SUBJECT: DIVERSITY TRAVEL, INC.

Ref. Number: P17000092282

We have received your document for DIVERSITY TRAVEL, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The current name of the entity is as referenced above. Please correct your document accordingly.

There's a period and comma in the corporate name.

Please specify which article number and/or article title you are amending, adding, or deleting.

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.

Irene Albritton Regulatory Specialist II

Letter Number: 418A00015204

Name corrected

(A) (J) secretary

Diversity Trosel, No.

Articles of Amendment to Articles of Incorporation of

Diversity Travel, Inc.	
(Name of Corporation as curren	ntly filed with the Florida Dept. of State)
P17000092282	
(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, thits Articles of Incorporation:	is Florida Profit Corporation adopts the following amendment(s
. If amending name, enter the new name of the corporation:	
\$/∧	The
name must be distinguishable and contain the word "corporat" "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or vord "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must contain the
3. Enter new principal office address, if applicable:	N/A
Principal office address <u>MUST BE A STREET ADDRESS</u>)	
. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	N/A The I
	To 2
	<u></u>
. If amending the registered agent and/or registered office ad	dress in Florida, enter the name of the
new registered agent and/or the new registered office addre	255:
Name of New Registered Agent	
(Florida s	street address)
Van Barinana (OZCar (11 N/A	T1 - 1
New Registered Office Address:	, Florida (City) (Zip Code)
ew Registered Agent's Signature, if changing Registered Ager	
hereby accept the appointment as registered agent. I am familia	r with and accept the obligations of the position.
C'anada a C'Anad	Registered Agent if changing

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)	
N/A	
IN/A	
	<u> </u>
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)	
N/A	
- · · · · · · · · · · · · · · · · · · ·	

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>14</u>	John Doc	
X Remove	<u>V</u>	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	V	Matthew Truin	Apt 83, Vantage Quay
XAdd		· · · · · · · · · · · · · · · · · · ·	5 Brewer St. Manchester, M1 2ER
Remove			United Kingdom
2) Change			
Add			
Remove			
3) Change		<u> </u>	
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			-
Remove			
6) Change			
Add			
Remove			

	July 13, 2018	
The date of each amendment(s) a date this document was signed.	doption:	, if other than the
July	: 13, 2018	
Effective date if applicable:	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the D	block does not meet the applicable statutory filing requirements, this date will epartment of State's records.	not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.	
	proved by the shareholders through voting groups. The following statement reach voting group entitled to vote separately on the amendment(s):	
"The number of votes cas	t for the amendment(s) was/were sufficient for approval	
bv	···	
,	(voting group)	
☐ The amendment(s) was/were ad action was not required.	opted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were ad action was not required.	opted by the incorporators without shareholder action and shareholder	
July 13, 20 Dated	018	
Signature	(ISt Lee TI)	_
selecti	director, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)	
	Robert Todd	
	(Typed or printed name of person signing)	
	Secretary	
	(Title of person signing)	