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2024-07-10 17.00:53 GMT

14076418083

From; EXPAT CONSULTING

7/9/24, 2:38 PM

Division of Corporations

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Account Number : I20190000096 Phone : (407)745-1112

Fax Number : (407)641-8083

J. HORNE JUL 1 1 2024

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## COR AMND/RESTATE/CORRECT OR O/D RESIGN **B&S VACATION CORP**

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TO: Amendment Section

## COVER LETTER

Division of Corp	orations				
NAME OF CORPO	RATION: B&S VACATION	CORP			
DOCUMENT NUMI	BER: P18000097127		· · · · · · · · · · · · · · · · · · ·		
	of Amendment and fee are su	bmitted for filing.			
Please return all corre	spondence concerning this ma	tter to the following:			
	SILVIA FREGNI				
	Name of Contact Person EXPAT CONSULTING CORP				
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	Address ORLANDO - FL - 32819				
		City/ State and Zip Code	· · · · · · · · · · · · · · · · · · ·		
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Enclosed is a check fo	r the following amount made	payable to the Florida Depa	artment of State:		
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Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, Fl. 32314		Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			

**B&S VACATION CORP** 

The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e). F.S.

## Articles of Amendment to Articles of Incorporation of

(Name of Corporation as currently filed with the Florida Dept. of State)	1-2
218000097127	· (-:
	<del></del>
(Document Number of Corporation (if known)	Ó
ursuant to the provisions of section 607,1006. Florida Statutes, this <i>Florida Profit Corporation</i> adopts the follost Articles of Incorporation:	nwing amendmen ص
. If amending name, enter the new name of the corporation:	
NB VACATION CORP	The new
ame must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbrev Inc.," or Co.," or the designation "Corp," "Inc," or "Co", A professional corporation name must co chartered," "professional association," or the abbreviation "P.A."	ration "Corp"
3. Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS )	<del></del>
. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  . 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	
tFlorida street addressa	
New Registered Office Address:, Florida	Zip Codes
Sew Registered Agent's Signature, if changing Registered Agent; hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the positi  Signature of New Registered Agent, if changing	ion.
Theck if applicable	

To: SUNBIZ . Page: 6 of 8 2024-07-10 17.00 53 GMT 14076418083 From: EXPAT CONSULTING

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.

X Change	<u>PT</u>	John D	<u>)0c</u>	
X Remove	$\underline{\mathbf{V}}$	Mikę J	<u>oneş</u>	
X Add	<u>SV</u>	Sally S	<u>Smith</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s
1) X Change	Р	_	N&B LLC	16192 COASTAL HIGHWAY
Add				LEWES - DE - 19958
Remove				
2) Change		_		
Add				
Remove Change		_		
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				<u></u>
6) Change				
Add				
Remove				

. Attach <i>additional st</i>	ing additional Article eets, if necessary). — (	Be specific)			
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lf an amendment p	ovides for an exchan	ge, reclassificatio	on, or cancellatio	on of issued shares	٠,
provisions for imp	lementing the amend	ment if not conta	ined in the ame	ndment itself:	-
(if not applical	le, indicate N/A)		· · · · · · · · · · · · · · · · · · ·		
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The date of each amendment(s) no	July 09th, 2024	, if other than the
date this document was signed.		
Effective date if annlicable:		
	oro more than 90 days after amendment tile date)	
Note: If the date inserted in this bedocument's effective date on the De	lock does not meet the applicable statutory filling requirements, this date will apartment of State's records.	I not be fisted as the
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was were ack action was not required.	spect by the incorporators, or board of directors without shareholder action and	l shareholder
The amendment(s) was/were ack by the shareholders was/were so	opied by the shareholders. The number of votes east for the amendment(s) afficient for approval.	
	raised by the shareholders through voting groups. The following statement - evels various group entitled to vote separately on the amendment(s).	
"The number of votes cast	for the internament(s) was were sufficient for approval	
BRUNO BIAGIONI N	ето	
	twoing groupt	
July 09	th, 2024/	
Signature	/w/	
, Clean	ircentr, president or other officer - if directors or officers have not been d, by an incorporator - if in the hands of a receiver, trustee, or other court led liduciary by that (iduciary)	
	BRUNO BIAGIONI NETO	
	(Typed or printed mane of person signing)	
	P	
	(Title of person signing)	