P20000012614

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: UNIQUE NEEDS	TRAVEL, INC	
DOCUMENT NUMI			
	of Amendment and fee are su	bmitted for filing.	
Please return all corres	spondence concerning this ma	tter to the following:	
	GEORGE DUNCAN		
		Name of Contact Perso	n
		Firm/ Company	
	1409 THOMPSON AVE		
		Address	
	LEHIGH ACRES, FL 33972		
		City/ State and Zip Cod	e
	YOUNIQUENEEDSTRAVE	L@GMAIL.COM	
	E-mail address: (to be us	ed for future annual report	notification)
For further information	n concerning this matter, pleas	se call:	
GEORGE DUNCAN		at (239	440-3464
Name o	of Contact Person		de & Daytime Telephone Number
Enclosed is a check fo	r the following amount made p	payable to the Florida Dep	artment 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)
Ame Divi P.O.	ling Address endment Section sion of Corporations Box 6327 shassee, FL 32314	Ameno Divisio The C 2415 I	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303

Articles of Amendment to Articles of Incorporation of

LIMITORIE MEEDS TRAVEL	DAIC	

(Name of Corporation as cur	rently filed with the Floric	la Dept. of State)	<u>, , </u>
P20000012674			
(Document Num	ber of Corporation (if know	n)	
Pursuant to the provisions of section 607.1006, Florida Statutes, its Articles of Incorporation:	, this <i>Florida Profit Corpord</i>	ation adopts the following a	mendment(s) t
A. If amending name, enter the new name of the corporation	<u>on:</u>		
YOUNIQUE NEEDS TRAVEL AGENCY, INC		T	he new
name must be distinguishable and contain the word "corporation". Inc.," or Co.," or the designation "Corp," "Inc," or "Co" "chartered," "professional association," or the abbreviation".	". A professional corpora	rated" or the abbreviation	"Corp.,"
B. Enter new principal office address, if applicable:			
(Principal office address <u>MUST BE A STREET ADDRESS</u>)		•	2020
		· · · · · · · · · · · · · · · · · · ·	T 7.3
			
C. Enter new mailing address, if applicable:		. '	- :1
(Mailing address MAY BE A POST OFFICE BOX)		.	<u> </u>
			جها ب
	, <u> </u>		
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office ad-		the name of the	
Name of New Registered Agent			
(Flori	ida street address)		
New Registered Office Address:		. Florida	
	(City)	(Zip Coa	le)
New Registered Agent's Signature, if changing Registered A I hereby accept the appointment as registered agent. I am fami		igations of the position	
		.8	
Signature of N	lew Registered Agent, if cha	nging	
Check if applicable	·	•	
Check if applicable ☐ The amendment(s) is/are being filed pursuant to s. 607.0120	(11) (e), F.S.		

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	<u>v</u>	Mike Jo		
X Add	<u>\$V</u>	<u>Şally Sr</u>	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	Address
1) Change		_		
Add				
Remove				
2) Change		_		
Add				
Remove Change		_		
Add				
Remove				
4) Change			, 	
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change		<u> </u>		
Add				
Remove				

(Attach ac	<mark>ing or adding addition</mark> Iditional sheets, if neces	iai Articies, enter ssary). (Be spec		; .		
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16			1			
provisio	ndment provides for a ns for implementing th	he amendment if				
(if n	ot applicable, indicate l	N/A)				
	·					
					•	
			. .			
					·	

The date of each amendment(s) a date this document was signed.	doption:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file d	ate)
Note: If the date inserted in this document's effective date on the E	block does not meet the applicable statutory filing requirent epartment of State's records.	nents, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ac action was not required.	opted by the incorporators, or board of directors without sha	reholder action and shareholder
☐ The amendment(s) was/were ac by the shareholders was/were s	opted by the shareholders. The number of votes east for the ufficient for approval.	amendment(s)
	proved by the shareholders through voting groups. The following group entitled to vote separately on the amendate	
"The number of votes cas	t for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voling group)	
02/18/202	0	
Dated		
Signature	The state of the s	
(B) a select	director, president or other officer – if directors or officers had, by an incorporator – if in the hands of a receiver, trustee, need fiduciary by that fiduciary)	
	GEORGE DUNCAN	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	