## P21000045678

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JUL 0 8 2021 A RAMSEY

Tallahassee, FL 32314

TO: Amendment Section

## **COVER LETTER**

Division of Corporations NAME OF CORPORATION: CR TRAVEL CORP P21000045678 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: JESUS E SUAREZ TOSCANO Name of Contact Person TOSCANO SYSTEMS LLC Firm/ Company 7533 BOUNTY AVE Address NORTH BAY VILLAGE FLORIDA 33141 City/ State and Zip Code toscanosf@yahoo.com , cr@crtravel.com.co E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (415 794-6989

Area Code & Daytime Telephone Number JESUS SUAREZ TOSCANO Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: S35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Mailing Address Street Address Amendment Section Amendment Section Division of Corporations **Division of Corporations** P.O. Box 6327 The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

FILED

CR TRAVEL CORP	2027 JUH - 2 PH 12 36			
(Name of Corporation as curren	tly filed with the Florida Dept. of State)			
P21000045678	TALL THE SEE STATE			
(Document Number	of Corporation (if known)			
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s)			
A. If amending name, enter the new name of the corporation:				
	The 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 "P.A.	A professional corporation name must contain the word			
B. Enter new principal office address, if applicable:	18501 Pines Blvd			
(Principal office address MUST BE A STREET ADDRESS)	Pembroke Pines			
	FL, 33029			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	18501 PINES BLVD SUITE 368			
	PEMBROKE PINES			
	FL 33029			
D. 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 address	<u>ss:</u>			
Name of New Registered Agent				
(Florida s	street address)			
New Registered Office Address:	, Florida			
	(City) (Zip Code)			
New Registered Agent's Signature, if changing Registered Ager	nt.			
I hereby accept the appointment as registered agent. I am familian	r with and accept the obligations of the position.			
, , ,				
	Desire and Asset if the major			
Signature of New	Registered Agent, if changing			
Check if applicable				

 $\Box$  The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), 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)

Example:

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 Doc	
X Remove	<u>v</u>	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	V	Sebastian Belisario Marin Echeverri	Calle 9 48-81 Local 267 Centro Co
X Add			LOLOMBIA
Remove	sv	Valentina Rengifo Ceballos	610 Granville Stret 2911
2) Change X Add			Vancouver British Colombia , V60
Remove Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

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·	05/24/2021	
The date of each amendment(s) add	ption:	, if other than th
date this document was signed.		
05/24	/2021	
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this blo document's effective date on the Dep	ock does not meet the applicable statutory filing requirements, this artment of State's records.	s date will not be listed as th
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/were adoptaction was not required.	ted by the incorporators, or board of directors without shareholder	action and shareholder
☐ The amendment(s) was/were adop by the shareholders was/were suf	ted by the shareholders. The number of votes cast for the amendmental ficient for approval.	ent(s)
	oved by the shareholders through voting groups. The following state ach voting group entitled to vote separately on the amendment(s):	tement
"The number of votes cast fo	or the amendment(s) was/were sufficient for approval	
CARLOS E RENGIFO	MARIN	
by	(voting group)	
04/24/2021		
Dated		
	Docusioned by:	
C:tuna		
Signature	ector, president or other officer – if directors or officers have not be	WMI
	by an incorporator – if in the hands of a receiver, trustee, or other	
	d fiduciary by that fiduciary)	. Out
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	CARLOS E RENGIFO MARIN	
-	(Typed or printed name of person signing)	<del></del>
	President	
_	(Title of person signing)	