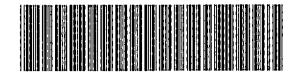
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(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	#)
PICK-UP	WAIT	MAIL
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(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only

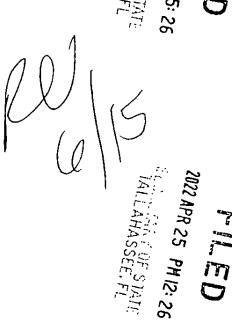


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## **COVER LETTER**

TO: Amendment Section Division of Corporations

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	<u> Staron r</u>	Name of Contact Perso	n		
-		Firm/ Company	_		
	13328 Cer	Her Ave			
	_	Address			
_	Lorgo FI	33773		*/ <u>*</u>	2
	J.	City/ State and Zip Cod	e	<u> </u>	N))
	Sharon O C E-mail address: (to be us	MOZIOOFOW sed for future annual report	elinc.com	TALLAHASSEF FAIR	
For further information	concerning this matter, pleas	se call;	; :		ָ כ
Sharun	honold	at ( <u>\$13</u>	<u> 401-0015</u>		
Name o	f Contact Person	Area Co	de & Daytime Telephone Nun	iber	
Enclosed is a check for	the following amount made	payable to the Florida Dep	artment of State:		
\$35 Filing Fee	S43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Ame Divis	ing Address indment Section sion of Corporations Box 6327	Ameno Divisio	Address Iment Section on of Corporations entre of Tallahassee		

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation

of

Amazing Travel Inc	
(Name of Corporation as current	ly filed with the Florida Dept. of State)
(Document Number of	of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
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:	
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
(Mailing address MAT BE A POST OFFICE BOX)	
	022
D. If amending the registered agent and/or registered office add	
new registered agent and/or the new registered office addres	
Name of New Registered Agent	
(Florida st	reet address)
New Registered Office Address:	(City) , Florida (Zip Code)
	, <u>, , , , , , , , , , , , , , , , , , </u>
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar	
Shore Land.	
Signature of New I	Registered Agent, if changing

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 Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	<u>P</u>	Shoron Kunold	13328 Center Ave
X Add			LONGO, FI 33773
Remove			
2) Change			
Add			<del></del>
Remove 3 ) Remove			22 APR
Add			25 HASS
Remove			The second secon
4) Change			
Add			
Remove			
5) Change			<u>-</u>
Add			
Remove			
6) Change			
Add			
Remove			

E. If amo	ending or add h <i>additional si</i>	<mark>ling additio</mark> heets, if nece	nal Articles. ssary). (B	, enter chang e specific)	<u>e(s) here</u> :					
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F. <u>If an</u>	amendment i	provides for	an exchang	e, reclassific:	ition, or can	cellation of	issued shar	es.	i di	Ö
<u>prov</u>	isions for im (if not applica	plementing ble, indicate	the amendm NA)	<u>ient if not co</u> i	ntained in th	<u>ie amendm</u>	ent_itself:	<i>د</i> ؛	27	
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The date of	each amendment(s) adoption:	, if other than the
	ument was signed.	
Effective da	te if applicable:	
	(no more than 90 days after amendment file date)	
	date inserted in this block does not meet the applicable statutory filing requirements, this date weffective date on the Department of State's records.	ill not be listed as th
Adoption of	Amendment(s) (CHECK ONE)	
	idment(s) was/were adopted by the incorporators, or board of directors without shareholder action ar s not required.	d shareholder
	idment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) areholders was/were sufficient for approval.	
The amen	adment(s) was/were approved by the shareholders through voting groups. The following statement separately provided for each voting group entitled to vote separately on the amendment(s):	
··Th	ne number of votes east for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
	Dated 4 15 22  Signature 2 20000 1 5	7027 APR 25
	(By a director, president or other officer – if directors or officers have not been $\pm 2$	
	selected, by an incorporator – if in the hands of a receiver, trustee, or other cour appointed fiduciary by that fiduciary)	5
	Smoon Abonold 777 (Typed or printed name of person signing)	FD 3
	President	•

(Title of person signing)