

PD3688064463
Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850)617-6380

From:

Account Name : SA FINANCE & ACCOUNTING INC.
Account Number : I20190000111
Phone : (407)800-7028
Fax Number : (407)992-9407

2024 OCT 31 AM 9:36

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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COR AMND/RESTATE/CORRECT OR O/D RESIGN

3JR SERVICES AND CONSULTING CORP

Certificate of Status	0
Certified Copy	0
Page Count	06
Estimated Charge	\$35.00

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: 3JR SERVICES AND CONSULTING CORP
DOCUMENT NUMBER: P23000064463

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Maria C Sousa Neiva

Name of Contact Person
SA FINANCE & ACCOUNTING INC
Firm/ Company
5728 Major Blvd Ste 307
Address
Orlando, FL 32819
City/ State and Zip Code
Licenses@safinacc.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Maria C Sousa Neiva at (407) 8007028
Name of Contact Person Area Code & Daytime Telephone Number

2014 OCT 31 AM 9:36

Articles of Amendment
to
Articles of Incorporation
of

JJR SERVICES AND CONSULTING CORP

(Name of Corporation as currently filed with the Florida Dept. of State)

P23000064463

(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

Ourtrip Travel and Tourism Corp

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

B. Enter new principal office address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

5728 Major Blvd Ste 307

ORLANDO, FL 32819

20240117 31
20240119 36

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

5728 Major Blvd Ste 307

ORLANDO, FL 32819

D. 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 _____

(Florida street address)

New Registered Office Address: _____, Florida _____
(City) _____ Zip Code _____

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New 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.

President, Treasurer, Director would be PT.
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:

Example: X Change PT John Doe

X Remove V Mike Jones

X Add SV Sally Smith

Address

Type of Action (Check One)	Title	Name	Address
1) <input checked="" type="checkbox"/> Change	P	João Cancio Barbosa Filho	Rua Iracema Guedes Lins, 430, Apt
_____ Add			Joao Pessoa PB Brasil 58046-135
_____ Remove			
2) <input checked="" type="checkbox"/> Change	P	Rayllanne de Oliveira Barbosa Bened	Rua Iracema Guedes Lins, 430, Apt
_____ Add			Joao Pessoa PB Brasil 58046-135
_____ Remove			
3) <input checked="" type="checkbox"/> Change			
_____ Add			
_____ Remove			
4) <input checked="" type="checkbox"/> Change			
_____ Add			
_____ Remove			
5) <input checked="" type="checkbox"/> Change			
_____ Add			
_____ Remove			
6) <input checked="" type="checkbox"/> Change			
_____ Add			
_____ Remove			

E. If amending or adding additional Articles, enter change(s) here:

(Attach additional sheets, if necessary). (Be specific)

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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)

The date of each amendment(s) adoption: _____, if other than the date this document was signed.

Effective date if applicable: _____
(no more than 90 days after amendment file date)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s) **(CHECK ONE)**

The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.

The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.

The amendment(s) was/were approved by the shareholders through voting groups. *The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):*

"The number of votes cast for the amendment(s) was/were sufficient for approval

by JOAO CANCIO B FILHO
(voting group)

Dated 10/31/2024

Signature Rayllanne Benedito
Oct-31-2024 10:14:26

(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

JOAO CANCIO B FILHO

(Typed or printed name of person signing)

P

(Title of person signing)

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