P9500035000

(Requestor's Name)	.
, ,	
(Address)	•
(Address)	
(City/State/Zip/Phone #)	.
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Business Entity Name)	
(Document Number)	•
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	
opposition to a state of the st	
	\

Office Use Only



500260879945

06/03/14--01006--018 **35.00

And JUN 20 2014

R. WHITE

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: MI TIERR	A TRAVEL, II	NC.
DOCUMENT NUMB	er: P950000350	000	
The enclosed Articles of	f Amendment and fee are sul	omitted for filing.	
Please return all corresp	oondence concerning this mat	ter to the following:	
	LEONARDO R	OJAS	
_	L&BPROFES		OCIATES, INC
	4913 SW 154 (
	MIAMI, FL 331	Address 85	
		City/ State and Zip Code	•
LR	OJASOVIEDO	@HOTMAIL.C	COM
	E-mail address: (to be us	sed for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
LEONARD	O R ROJAS	_{at (} 786	487-6703
Name c	f Contact Person		de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	rtment of State:
■ \$35 Filing Fee	S43.75 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)

Mailing Address

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

		E	.ED		
14	j in Voti	-0		7:	Ü

MI TIERRA TRAVEL, INC

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

P95000035000

endment(s) to

(Document Number of Corporation	(if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, thi its Articles of Incorporation:	is Florida Profit Corporation adopts the following ame
A. If amending name, enter the new name of the corporation:	
	The
name must be distinguishable and contain the word "corporat "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must contain
3. Enter new principal office address, if applicable:	10360 SW 16 STREET
Principal office address MUST BE A STREET ADDRESS)	MIAMI, FL 33165
C. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
	·
D. If amending the registered agent and/or registered office ad	deress in Florida, enter the name of the
new registered agent and/or the new registered office addre	
Name of New Registered Agent	
(Florida	street address)
New Registered Office Address:	, Florida
(Cı	ity) (Zip Code)
New Registered Agent's Signature, if changing Registered Age	
I hereby accept the appointment as registered agent. I am familia	ir with and accept the obligations of the position.
Give the GNL B	- I A (f - L i
Signature of New Registere	ed Agent, if changing

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.

<u>PT</u>	John Doc	
<u>V</u>	Mike Jones	
<u>SV</u>	Sally Smith	
<u>Title</u>	Name	<u>Address</u> s
VP	LOLO, KATIA	15252 SW 223RD STREET
		MIAMI, FL 33170
	<u>V</u> <u>SV</u> <u>Title</u>	V Mike Jones SV Sally Smith Title Name

If amending or adding additions (Attach additional sheets, if necess)	sary). (Be	specific)	.(3) <u>Here</u> .			
		783			- +w'	
	·			-	1,4-	
	 -				 _	
	-			····	·	<u></u>
	·					
	<u></u>					
				<u>. </u>		· · · · · · · · · · · · · · · · · · ·
	·					
	····					···
And the second s				-		
						
If an amendment provides for a provisions for implementing the (if not applicable, indicate?)	<u>e amendme</u>	, reclassifica ent if not con	tion, or cand tained in the	ellation of is	sued shares t itself:	<u>s.</u>
	·					
						
						

date this document was signed.	doption;	, if other th
<u> </u>		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	_
	, , , , , , , , , , , , , , , , , , ,	
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were add by the shareholders was/were st	opted by the shareholders. The number of votes cast for the amendment(s) afficient for approval.	
The amendment(s) was/were ap- must be separately provided for	proved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
"The number of votes east	for the amendment(s) was/were sufficient for approval	
by	· (voting group)	
	· (voting group)	
The amendment(s) was/were ad- action was not required.	opted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were ad- action was not required.	opted by the incorporators without shareholder action and shareholder	
Dated 06/04/2	014	
Signature	ein Santelour D	
	lirector, 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	
appoir	ted fiduciary by that fiduciary)	
	REINA SANTA CRUZ-PACHECO	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	