

PC3000083209

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

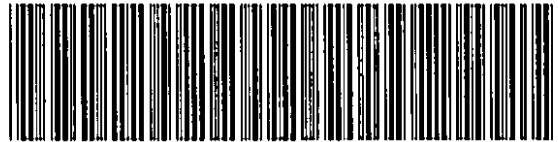
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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MAY 22 2018

I ALBRITTON

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Vacation Auctions Inc.

DOCUMENT NUMBER: P03000083209

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

Please return all correspondence concerning this matter to the following:

Salvatore Dickinson

Name of Contact Person

Vacation Auctions Inc.

Firm/ Company

15108 Ports of Iona Dr.

Address

Ft. Myers FL 33908-1812

City/ State and Zip Code

sal.dickinson@dickinsonassoc.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Salvatore Dickinson at (239) 770-5555
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

- | | | | |
|---|--|---|--|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input type="checkbox"/> \$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
of

Vacation Auctions Inc.

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

P03000083209

(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:

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)

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 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:

(City)

, Florida

(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

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TALLAHASSEE, FLORIDA

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:

☒ Change PT John Doe

☐ Remove V Mike Jones

☐ Add SV Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <input type="checkbox"/> Change	<u>D</u>	<u>Alan Kohler</u>	<u>40 Bulger Street</u>
<input checked="" type="checkbox"/> Add			<u>Babylon NY 11702</u>
<input type="checkbox"/> Remove			<u></u>
2) <input type="checkbox"/> Change	<u>D</u>	<u>Christy Collins</u>	<u>405 Prather Drive</u>
<input checked="" type="checkbox"/> Add			<u>Ft. Myers FL 33919</u>
<input type="checkbox"/> Remove			<u></u>
3) <input type="checkbox"/> Change	<u>D</u>	<u>Matthew Connor</u>	<u>1927 SW 12th Place</u>
<input checked="" type="checkbox"/> Add			<u>Cape Coral FL 33991</u>
<input type="checkbox"/> Remove			<u></u>
4) <input type="checkbox"/> Change	<u>D</u>	<u>Ed Furtek</u>	<u>427 Jaye Court</u>
<input checked="" type="checkbox"/> Add			<u>N. Ft. Myers FL 33903</u>
<input type="checkbox"/> Remove			<u></u>
5) <input type="checkbox"/> Change	<u>D</u>	<u>Doug Hughes</u>	<u>16 Dogwood Acres</u>
<input checked="" type="checkbox"/> Add			<u>Chapel Hill NC 27516</u>
<input type="checkbox"/> Remove			<u></u>
6) <input type="checkbox"/> Change	<u>D</u>	<u>Doug Luciani</u>	<u>1404 Conservancy Drive</u>
<input checked="" type="checkbox"/> Add			<u>Tallahassee FL 32312</u>
<input type="checkbox"/> Remove			<u></u>

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

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

need to add an additional director your form cannot accommodate

Director - Ursula Boll

5208 Bay Shore Road

Sarasota FL 33434

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)

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 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 _____,"
(voting group)

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

May 16 2018
Dated _____

Signature _____
(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)

Salvatore Dickinson

(Typed or printed name of person signing)

President/CEO

(Title of person signing)