P08000105162

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





600212573366

10/03/11--01025--016 **35.00

Amend

11 OCT -3 PH 12: 28
SECRETARY OF STATE
SALLAHASSEE FLORID

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF COR	PORATION:	Marathon Vacation	a.com Inc.
DOCUMENT NU	JMBER:	P0800010	5162
The enclosed Artic	cles of Amendment and fee a	are submitted for filing.	
Please return all co	orrespondence concerning th	is matter to the following:	
Jo Ann Cook			
	r	Jame of Contact Person	
	Marat	hon Vacation.com Inc. Firm/ Company	
		1 mm Company	
	10	055 Overseas Hwy Address	
		arathon, FL 33050 Sity/ State and Zip Code	
	joann@ma E-mail address: (to be use	arathonvacation.com d for future annual report notifi	cation)
For further inform	ation concerning this matter,	please call:	
**************************************			360-7968
Name	of Contact Person	Area Code & Day	rtime Telephone Number
Enclosed is a chec	k for the following amount n	nade payable to the Florida	Department of State:
\$35 Filing Fee	\$43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee & Certified Copy (Additional copy is end	Closed) \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
MailingA		Street Address	
Amendmer		Amendment Section	ions
P.O. Box 6	f Corporations	Division of Corporati Clifton Building	10115
F.O. BOX 0327 Tallahassee FI 32314		2661 Executive Cent	er Circle

Tallahassee, FL 32301

Articles of Amendment

· ' '	Articles of Inco	orporation	#	
	of		11 OCT -	and the
MARATHON VACATOR (Name of Corporation as curre	HANI CA	an This	11 OCT -3 P	412:20
(Name of Corporation as curre	ently filed with	the Florida Dept. of S	tale AHACAY OF	- 28
			MOSEEF	LORID
(Document Nun	nber of Corporati	on (if known)		710g
Pursuant to the provisions of section 607.1006 amendment(s) to its Articles of Incorporation:	5, Florida Statut	es, this <i>Florida Profi</i>	it Corporation adop	ots the following
A. If amending name, enter the new name of	f the corporation	<u>n:</u>		
				The new
name must be distinguishable and contain abbreviation "Corp.," "Inc.," or Co.," or the name must contain the word "chartered," "pro	designation "Co	orp," "Inc," or "Co".	. A professional c	
B. Enter new principal office address, if app	licable:	10055	OUERSEA	s HIGHWAY
(Principal office address MUST BE A STREE				
		MARA	THON FL	33050
				_
C. Enter new mailing address, if applicables (Mailing address MAY BE A POST OFFICE)		Po Box	5000	<u>2</u> 1
		MARATI	+1,4) F/ 3	33050
			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	, 303 O -
D. If amending the registered agent and/or r	ogistored office	address in Florida o	ntar the name of t	ho
new registered agent and/or the new regis			itter the name of the	<u>ire</u>
Name of New Registered Agent:	Jo A	UN COOK		
Non-Positional Office Address	10055	Oversen- da street address)	s Hioldw	AY
	Α			
/	MANA	- THON	, Florida	
	(City)	(2	cip Code) 3	3050
New Registered Agent's Signature if changing	na Registered A	gent.		

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

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)

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
Dir	Gidget Jackson	227 Angler's Drive 203 Marathon, FL 33050	☑ Add □ Remove
(attach a	dditional sheets, if necessary). (I	Be specific)	
provisi		nge, reclassification, or cancellation o ment if not contained in the amendme	
		· · · · · · · · · · · · · · · · · · ·	

The date of each amendmen	t(s) adoption:	10-1	- //	
		(date of adoption is	required)	
Effective date if applicable:	(no more than 00	days after amendmen	//	
	(no more than 90	aays ajier amenamei	ni jue dalej	
Adoption of Amendment(s)	СНЕ	CCK ONE)		
The amendment(s) was/we by the shareholders was/w	re adopted by the sleere sufficient for ap	hareholders. The nur	mber of votes cast for the amer	ndment(s)
The amendment(s) was/we must be separately provide	re approved by the ed for each voting g	shareholders through	n voting groups. The following separately on the amendment(.	; statement s):
"The number of votes	cast for the amendr	ment(s) was/were suf	ficient for approval	
by			,,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
•	(voting group)			
action was not required.			hout shareholder action and sha	
Dated	9-27-11			
sele	a director, presider	orator - if in the hand	f directors or officers have not s of a receiver, trustee, or other	
app	ointed fiduciary by	that fiduciary)		
		Jo Ann	person signing)	
	(Type	ed or printed name of	person signing)	
	/e	/		
		RESIBEN	<i>T</i>	
	(Title of p	person signing)		