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(Re	equestor's Name)	
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(Cit	ty/State/Zip/Phone	e #)
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SECRETARY OF STATE
TALLAHASSEF, FI GOLD

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COVER LETTER

TO: Amendment Section **Division of Corporations**

NAME OF CORI	PORATION:	Empowering Excursions	lnc.
DOCUMENT NUMBER:		P09000074589	
The enclosed Artic	cles of Amendment and fee a	re submitted for filing.	
Please return all co	orrespondence concerning thi	is matter to the following:	
		Arlyne Cervetti	
	Empo	wering Excursions Inc Firm/ Company	The state of the s
		PO Box 115	
		Address	AND THE RESIDENCE OF THE PERSON OF
		aton Beach, FL 33425	
		ity/ State and Zip Code	•
	E-mail address: (to be use	ti99@yahoo.com d for future annual report notification)	
For further information	ation concerning this matter,	please call:	
			58-5040
	of Contact Person	Area Code & Daytime Tele	•
☑ \$35 Filing Fee	□ \$ 43.75 Filing F cc &	\$43.75 Filing Fee &	☐ \$52.50 Filing Fee
	Certificate of Status	Certified Copy (Additional copy is enclosed)	Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing A		Street Address Amendment Section	
Division of Corporations		Division of Corporations	
P.O. Box 6 Tallahasse	327 e, FL 32314	Clifton Building 2661 Executive Center Circle	e

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Empowering Excursion	ns Inc.
(Name of Corporation as currently filed with	the Florida Dept. of State)
P09000074589	
(Document Number of Corporati	ion (if known)
Pursuant to the provisions of section 607.1006, Florida Statut amendment(s) to its Articles of Incorporation:	es, this Florida Profit Corporation adopts the following
A. If amending name, enter the new name of the corporation	<u>n:</u>
	The new
name must be distinguishable and contain the word "corp abbreviation "Corp.," "Inc.," or Co.," or the designation "Contain the word "chartered," "professional associations and the word "chartered," "professional associations are must contain the word "chartered," "professional associations are must contain the word "chartered," "professional associations are must be distinguishable and contain the word "corp abbreviation" or contain the word "corp abbreviation" or contain the word "corp abbreviation" or co., "or the designation "Corp abbreviation" or co., "or co., "or the designation are must contain the word "chartered," "professional association are must contain the word "chartered," "professional associati	oration," "company," or "incorporated" or the orp," "Inc," or "Co". A professional corporation
B. Enter new principal office address, if applicable:	925 Sun Acres Lane
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	Boynton Beach, FL 33436
	44
C. Enter new mailing address, if applicable; (Mailing address MAY BE A POST OFFICE BOX)	PO Box 115
	Boynton Beach, FL 33425
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office ado	
Name of New Registered Agent:	
925 Sun Acre	es lane
· · · · · · · · · · · · · · · · · · ·	ida street address)
Boynton Bead	ch , Florida 33436
(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered A I hereby accept the appointment as registered agent. I am familiary	gent:
Signature of New	Registered Agent, if changing Registered Agent, if changing Registered Agent, if changing

Page 1 of 3

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
<u>VP</u>	Aaron Chapple	925 Sun Acres Lane Boynton Beach, FL 33436	
			□ Add □ Remove
W			
(anach an	lditional sheets, if necessary). (be specific)	
provisio		nge, reclassification, or cancellation of ment if not contained in the amendmen	
N/A			

The date of each amendmen	t(s) adoption: September 25, 2005
Effective date <u>if applicable</u> :	September 25, 2009
Elective date of Billians	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
	ere adopted by the shareholders. The number of votes cast for the amendment(s) were sufficient for approval.
	ere approved by the shareholders through voting groups. The following statement and 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/we action was not required.	ere adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/we action was not required.	ere adopted by the incorporators without shareholder action and shareholder
Signature _ (B) sel	y a director, president or other officer – if directors or officers have not been ected, by an incorporator – if in the hands of a receiver, trustee, or other court
apı	pointed fiduciary by that fiduciary) Arlyne Cervetti
	(Typed or printed name of person signing)
	President
	(Title of person signing)