## P1000006712

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: ETC CONCIERCE, JAC.	
DOCUMENT NUMBER: P10000006712	
The enclosed Articles of Amendment and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
BONNIE MONTGON ERY WAGNER Name of Contact/Person	
ETC CONCIERGE, Inc.	
Firm/ Company	
500 NE Spanish RIVER Blud. +	*103-A
Boca Raton, Florida 33431	
City/ State and Zip Code	
Bonnie @ Elitetravel Concier GE. Co E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Bonnie M. Wagner at (561.) 350.  Name of Contact Person Area Code & Daytime Tel	4460 ephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:	
\$35 Filing Fee Certificate of Status Certified Copy Certificate of Certified Copy (Additional copy is enclosed)  \$35 Filing Fee & Certified Copy (Additional Copy is enclosed)	Status by

**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

. · · · · · · · · · · · · · · · · · · ·	rticles of Incorporation.
ETC C	oncience Jac.
	n as currently filed with the Florida Dept. of State)
Plana	0006712
	ent Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	Statutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the cor	poration:
	"corporation," "company," or "incorporated" or the abbreviation "Inc," or "Co". A professional corporation name must contain the abbreviation "P.A."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDI	
C. Enter new mailing address, if applicable: (Malling address MAY BE A POST OFFICE BOX	
D. I(amending the registered agent and/or registered new registered agent and/or the new registered of	ed office address in Florida, enter the name of the
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.	stered Agent: am familiar with and accept the obligations of the position.
Cio	ture of New Registered Agent, if changing
Signa	ane of them degistered rigem, 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.

Example: X Change	<u>PT</u>	John Do	<u>oe</u>	
X Remove	<u>Y</u>	Mike Jo	<u>ones</u>	
X Add	<u>sv</u>	Sally Si	<u>mith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change	VP	) 	KATHRYN Rae Knapp	20868 ancied Green DR.V Boca Rayon
Add			1	Boca Raton
Remove				Fl 33433
2) Change	VP	<b>)</b>	GEORGE A. WAKELING	641 NW 10th COURT
_X_ Add			9	Boca Raton
Remove				Fla. 33486
3 ) Change	<del> </del>			
Add				And the state of t
Remove				
4) Change	····			
Add				**************************************
Remove				
5) Change	<del></del>	<del></del>		رود در او در ا
Add				
Remove				
δ) Change				
Add				
Remove				

Attach additional sheets, if necessary):	(Be specific)
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	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:
Bonnie Montsonje	RY LAGNER IS SIVING GEORGE H. WAKE
29 SharES Eff	ECTIVE January 1ST, 2015
Bonnie Montgom	ETLY WAGNER IS REMOVING
KATHEYN ROE KNA	ELY WAGNER IS SIVING GEORGE A. WAKE FECTIVE January 1st, 2015 ERY WAGNER IS REMOVING APP AS VP and HER Shalls of 10 Lary 1st, 2015
Effective JANU	ary 15T, 2015

The date of each amendment(s) adoption: January 157, 2015, 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 umendment(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.
Dated January 1st 2015
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)
Bonne Monton ERY Wagner  (Typed or printed name of person signing)
PRESIDENT (Title of person signing)