## P/10008893

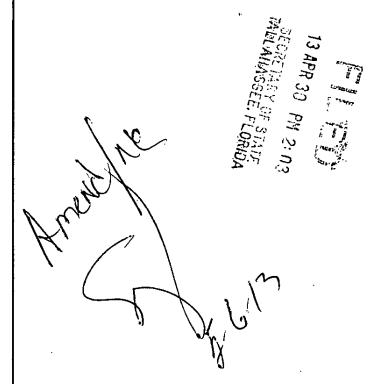
(Re	equestor's Name)	
(Ac	ddress)	
- (Δ.	ddress)	
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(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: EX TRAVE	L MANAGEMEN	NT INC.
DOCUMENT NUMBER: P1100008829	3	
The enclosed Articles of Amendment and fee are su		
Please return all correspondence concerning this man	tter to the following:	
John Rogers Jr.		
<del></del>	Name of Contact Persor	1
Rogers Travel Inc	<b>c</b> .	
	Firm/ Company	
903 E. Skagway	Ave.	
	Address	
Tampa Florida 33	3604	
	City/ State and Zip Code	2
rogerstravel@gmail.d	com	
E-mail address: (to be us	sed for future annual report	notification)
For further information concerning this matter, pleas	se call:	
John Rogers Jr.	at (407	495-0742
Name of Contact Person	Area Code & Daytime Telephone Number	
Enclosed is a check for the following amount made	payable to the Florida Depa	artment of State:
\$35 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	Amend Divisio Clifton	Address Iment Section on of Corporations Building Executive Center Circle

Tallahassee, FL 32301

## **Articles of Amendment** Articles of Incorporation of



ì

## EX TRAVEL MANAGEMENT INC.

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

P110000882963

ent(s) to

	ame of the corporation:		
Rogers Travel Inc.			The >
ame must be distinguishable and cot Corp.," "Inc.," or Co.," or the design ord "chartered," "professional associa	nation "Corp," "Inc," or "C	Co". A professional corpora	rated" or the abbreviat tion name must contain
B. Enter new principal office address.	if applicable:	same	
(Principal office address MUST BE A STREET ADDRESS)			
Enter new mailing address, if app		same	
(Mailing address <u>MAY BE A POST</u>	OFFICE BOX)	- Same	
N 16 12 41	16 16 16 11	. 73	£4b -
<ol> <li>If amending the registered agent as</li> </ol>			e or the
new registered agent and/or the ne			
new registered agent and/or the ne	John Rogers Jr.		
	·	Ave	
new registered agent and/or the ne	903 E. Skagway		
new registered agent and/or the ne	903 E. Skagway	e1 address)	33604
new registered agent and/or the ne	903 E. Skagway		33604 (Zip Code)
new registered agent and/or the ne	903 E. Skagway (Florida stre	e1 address)	33604 (Zip Code)

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 Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	RA	Ron Barbaza	
X Remove			
2) Change	RA	John Rogers Jr.	903 E. Skagway Ave.
X Add		•.	Tampa Fl. 33604
Remove		·	
3 ) Change			
Add			
Remove			
4) Change		·-	
Add			
Remove			
5) Change			
Add			
Remove		•	
6) Change			
Add			
Remove			

teans baratsinar and bags	. (Be specific)	
need the registered agent to be changed to my name please "John Roger Jr		
	·	
· · · · · · · · · · · · · · · · · · ·		
If an amendment provides for an exc	change, reclassification, or cancellation of issued shares, nendment if not contained in the amendment itself:	
provisions for implementing the am	tenument if not contained in the unenginent reserve	
(if not applicable, indicate N/A)		
(if not upplicable, indicate N/A)		
(if not applicable, indicate N/A)		
(if not upplicable, indicate N/A)		
(if not applicable, indicate N/A)		
(if not upplicable, indicate N/A)		
(if not upplicable, indicate N/A)		
(if not upplicable, indicate N/A)		
(if not applicable, indicate N/A)		
(if not upplicable, indicate N/A)		
(if not applicable, indicate N/A)		

The date of each amendment(s) adoption: April 18, 2013 April 18, 2013 Effective date if applicable: (no more than 90 days after amendment file date) 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 (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 04/18/2013 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) John Rogers Jr. (Typed or printed name of person signing) President and Registered Agent (Title of person signing)