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C. CARROTHERS

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORA	ATION: PREMIER CONV	ENTION CONCIERGE, I	NC.
DOCUMENT NUMBI			
	f Amendment and fee are su	abmitted for filing.	
Please return all corresp	ondence concerning this ma	itter to the following:	
N	41CHAEL GUYARD		
<del></del>		Name of Contact Person	n
ئر	A.B.S. ASSOCIATES INC		
_		Firm/ Company	<b>6</b> 0 13.
1	897 PALM BEACH LAKE	S(BLVD #219 ᇽ	*
-	*	Address .	· · · · · · · · · · · · · · · · · · ·
\	VEST PALM BEACH FL 3	3409	
-		City/ State and Zip Cod	e · · · · ·
A.B.S.	ASSOCIATES@HOTMAII	COM	
	E-mail address: (to be u	sed for future annual report	notification)
For further information	concerning this matter, plea		478-1451
Name of	Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made		
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□S43.75 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		Amenc Divisio	Address  Iment Section on of Corporations i Building

## Articles of Amendment to Articles of Incorporation of

PREMIER CONVENTION CONCIERGE, INC.

( <u>Name of Corporatio</u>	as currently filed with the Florida Dept. of State)	
P14000002151		
(Docume	nt Number of Corporation (if known)	
Pursuant to the provisions of section 607,1006, Florida its Articles of Incorporation:	Statutes, this <i>Florida Profit Corporation</i> adopts the fol	
A. If amending name, enter the new name of the cor	poration:	They new 15
FLOOD RISK AMERICA, INC.		The new
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp." word "chartered," "professional association," or the a B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADD)  C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	"Inc," or "Co". A professional corporation name bbreviation "P.A."  RESS )	, <del>.</del>
D. If amending the registered agent and/or registered new registered agent and/or the new registered of New Registered Agent		
	(Florida street address)	
Var David and Office Alliana		
New Acquiered Office Address:	(City)	(Zip Code)
Name of New Registered Agent  New Registered Office Address:  New Registered Agent's Signature, if changing Registereby accept the appointment as registered agent. I	tered Agent:	,
Signa	ture of New Registered Agent, if changing	<del></del>

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.

X Change	PT	John Do	<u>oe</u>	
X Remove	$\underline{V}$	Mike Jo	ones .	
X Add	<u>sv</u>	Sally Sr	nith_	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s
1) Change		_		
Add				
Remove				
2) Change				
Remove				
3 } Change				
Add				
Remove				
4) Change				
Add		<del></del>		
Remove				
5) Change		_	<del></del>	
Add				·
Remove				
6) Change		_		
Add				
Remove				

If amending or adding additional Art Attach additional sheets, if necessary).	(Be specific)
6	and the second s
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	

The date of each amendment(s) addate this document was signed.	doption:	, if other than the
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
<b>Note:</b> If the date inserted in this hadocument's effective date on the De	block does not meet the applicable statutory filing requirements, this date epartment of State's records.	will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes east for the amendment(s) ifficient for approval.	
	proved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	1
"The number of votes east	for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
The amendment(s) was/were addaction was not required.	opted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were add action was not required.	opted by the incorporators without shareholder action and shareholder	
4/26/16 Dated		
Signature 📐	tul. s	
(By a d selecte	irector, president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other court ted fiduciary by that fiduciary)	
	STEPHEN GILL	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	