P1400010013

(Re	questor's Name)		
(Ad	dress)		
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(Cit	y/State/Zip/Phone	e #)	
PICK-UP	☐ WAIT	MAIL	
(Business Entity Name)			
(Do	cument Number)		
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: Econ Trave BER: P1400001007	el Destinations l	lnc.	
The enclosed Articles	of Amendment and fee are su	bmitted for filing.		
Please return all corre	spondence concerning this ma	tter to the following:		
	Eirisse Mororo			
		Name of Contact Person	1	
	Econ Travel Des	tinations Inc.		
		Firm/ Company		
	1225 upstreet ct			
		Address		
	Orlando, FL 3283	37		
		City/ State and Zip Cod	e	
sal	es2@econtravelo	lestinations.con	า	
		sed for future annual report		
		·		
For further informatio	n concerning this matter, pleas	se call:		
Eirisse Moro	oro	_{#1} 813	3685533	
Name	of Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment of State:	
■ \$35 Filing Fee	□\$43.75 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			Address	
Amendment Section		Amendment Section		
Division of Corporations P.O. Box 6327		Division of Corporations Clifton Building		
Tallahassee, FL 32314			Executive Center Circle	

Tallahassee, FL 32301



February 24, 2014

EIRISSE MORORO ECON TRAVEL DESTINATIONS INC 1225 UPSTREET CT ORLANDO, FL 32837

SUBJECT: ECON TRAVEL DESTINATIONS INC.

Ref. Number: P14000010073

We have received your document for ECON TRAVEL DESTINATIONS INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with a telephone number where you can be reached during working hours.

You have listed the incorrect document number and please verify that your intention was to add the letter (c) at the end of DESTINATION instead of a (s) in the NEW corporate name.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton Regulatory Specialist II

Letter Number: 814A00004018

THE OFFICE OF STORY

Articles of Amendment to Articles of Incorporation of



Econ Travel Destinations Inc.

(Name of Corporation as currently filed with the Florida Dept. of State) P14000010073 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: EconTravel Destinations Inc. name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." 1225 Upstreet ct B. Enter new principal office address, if applicable: Orlando, FL 32837 (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)

(Florida street address)

New Registered Office Address: , Florida (Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

new registered agent and/or the new registered office address:

Name of New Registered Agent

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

D. If amending the registered agent and/or registered office address in Florida, enter the name of the

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)

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	<u>PT</u>	John D	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	<u>ones</u>	
X Add	<u>\$V</u>	Sally Si	mith	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change	VP		Carlos Machado	2775 Cullens ct
Add				Ocoee FL, 34761
Remove				
2) Change		_		
Add				
Remove				
3) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change		_		
Add				
Remove				

	(Be specific)		
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If an amendment provides for an exch	ange, reclassification, or ca	ncellation of issued sl	ares,
provisions for implementing the ame	ange, reclassification, or ca adment if not contained in t	ncellation of issued sl he amendment itself:	ares.
If an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	ange, reclassification, or ca Idment if not contained in t	ncellation of issued sl he amendment itself:	iares.
provisions for implementing the ame	ange, reclassification, or ca idment if not contained in t	ncellation of issued sl he amendment itself:	iares.
provisions for implementing the ame	ange, reclassification, or ca adment if not contained in t	ncellation of issued sl he amendment itself:	lares.
provisions for implementing the ame	ange, reclassification, or ca Idment if not contained in t	ncellation of issued sl he amendment itself:	iares,
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provisions for implementing the ame	ange, reclassification, or ca	ncellation of issued sl he amendment itself:	iares.

The date of each amendment(s) adoption: date this document was signed.	if other than the
Effective date if applicable: 3314	
(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	
by	
(voung 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.	
Date 3/3/14	
Dated 3/3/14	
Signature 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)	
Eirisse Mororo	
(Typed or printed name of person signing)	
President	
(Title of person signing)	