# P16000171a5

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			

Office Use Only



300298803483

05/04/17--01013--005 \*\*52.50



114Y 0 9 2017. T. LEMIEUX



## **COVER LETTER**

TO: Amendment Section Division of Corporations Travel Resource Vacation Club Inc NAME OF CORPORATION: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: resource Vacation C resourcevacational bagmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: \$52.50 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □ \$35 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy

enclosed)

### **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

(Additional Copy is enclosed)

# Articles of Amendment

to

Articles of Incorporation of

P1600001	y filed with the Florida Dept. of State)  7/25  f Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:  A name must be distinguishable and contain the word "corporation" "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc," or word "chartered," "professional association," or the abbreviation"	Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	N/A
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A LECT MAY
6640 SW 7	V. Gibbon JREED >
New Registered Office Address: 5 A	(City), Florida
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar	: with and accept the obligations of the position.

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.

	e, and bully britin, by as an riad.
Example: X Change	PT John Doe
X Remove	V Mike Jones
X Add	SV Sally Smith
Type of Action (Check One)	<u>Title</u> <u>Name</u> <u>Addres</u> s
1) Change	ceo Althea Gibbons 6640 sw 7st Margate Fl 33068
Add	Margate H 33068
2) Change	President Lawrence V. Gubbonsst Pobox 590863  Ft Lauderdale F1 3335
Add	F7 lauderde 1 7370
Remove 3) Change	CED LAWRENCE V Gibbonsje Po box 590863 Ft lauderdule Fl
Add	33359
4) Change	
Add Remove	
5) Change	
Add	
Remove	
6) Change	
Add	
Remove	

If amending or adding additional Art Attach additional sheets, if necessary).	(Be specific)	
	<i>N/</i> [\	
33471	***************************************	
<u> </u>		
· · · · · · · · · · · · · · · · · · ·		
	1	
		The second secon
, <u>(198</u> y Ar <del>2</del> )		
		·
f an amendment provides for an excl	ange, reclassification, or cancella	tion of issued shares.
f an amendment provides for an exch provisions for implementing the ame	dment if not contained in the am	endment itself:
(if not applicable, indicate N/A)		
	N/N	
	<u> </u>	
		· · · · · · · · · · · · · · · · · · ·

The date of each amendment(s) adoption:	, 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 wi document's effective date on the Department of State's records.	ll not be listed as the
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"  (voting group)	
(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 4 28 17	
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)	
appointed fiduciary by that fiduciary)	
Lawrence V G. bbons JR	
(Typed or printed name of person signing)	
President	
(Title of person signing)	

### **COVER LETTER**

TO: Amendment Section Division of Corporations ravel Resource Vacation Club Inc The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: For further information concerning this matter, please call: Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & \$52.50 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy

enclosed)

**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

(Additional Copy is enclosed)