P170000009953

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Amendices

NOV 30 2017 I ALBRITTON

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: CREATIVE CON	CIERGE OF THE VILLAG	ES INCORPORATED
DOCUMENT NUMB	P17000040053		 -
The enclosed Articles of	f Amendment and fee are su	bmitted for filing.	
Please return all corresp	condence concerning this ma	tter to the following:	
,	THOMAS H. POOLE JR.		
-		Name of Contact Person	
(CREATIVE CONCIERGE C	F THE VILLAGES INCO	RPORATED
-		Firm/ Company	 -
-	721 VIBRANT LANE		
-		Address	
	THE VILLAGES, FL 32163		
-		City/ State and Zip Code	,
thoma	s@creativeconciergevillages.	com	
		sed for future annual report	notification)
For further information Thomas H. Poole, Jr.	concerning this matter, pleas	se call:	233-4269 Ext.3
Name o	f Contact Person		de & Daytime Telephone Number
Enclosed is a check for	the following amount made		
□ \$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)
Amer Divis P.O.	ing Address indiment Section ion of Corporations Box 6327 hassee, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section n of Corporations Building xecutive Center Circle ssee, FL 32301

Articles of Amendment to Articles of Incorporation of

CREATIVE CONCIERGE OF THE VILLAGES INCORPORATED

(Name of Corporation	on as currently filed with the Florida Dept. of State)
P17000069953	
(LXocum	nent 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 co	rporation:
"Corp.," "Inc.," or Co.," or the designation "Corp,	The new d "corporation," "company," or "incorporated" or the abbreviation ""Inc," or "Co". A professional corporation name must contain the
word "chartered," "professional association," or the a	ahbreviation "P.A."
B. <u>Enter new principal office address, if applicable</u> (Principal office address <u>MUST BE A STREET ADD</u>	PRESS)
C. Enter new mailing address, if applicable:	23
(Mailing address <u>MAY BE A POST OFFICE BO</u>	
	TO NOTE TO STATE OF THE PARTY O
	——————————————————————————————————————
D. If amending the registered agent and/or register new registered agent and/or the new registered of a	
Name of New Registered Agent	
	
	(Florida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Regi	istered Agent: I am familiar with and accept the obligations of the position.
r nereo, accept the appointment as regimered agent.	t an janutar with and accept the obligations by the position.
Signo	ature 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.

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)	Title	Name	<u>Addres</u> s
1) Change	CFO	BLANCHE ANITA CRUMEL	2186 JEM PATH
X Add			THE VILLAGES, FL32162
Remove			
2) Change		<u> </u>	
Add			
Remove			
3) Change			
Add			
Remove			
4)Change			
Add			
Remove			
5) Change		<u> </u>	
Add			
Remove			
6) Change		···	
Add			
Remove			

If amending or adding additional Art Attach additional sheets, if necessary).	
	
•	
f an amendment provides for an eve	hange, reclassification, or cancellation of issued shares,
provisions for implementing the ame (if not applicable, indicate N/A)	endment if not contained in the amendment itself:
 	

	NOVEMBER 25, 2017	io al calcula
The date of each amendment(s) a date this document was signed.	doption:	, if other than th
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the D	block does not meet the applicable statutory filing requirements, this datepartment of State's records.	e will not be listed as th
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes east for the amendment(sufficient for approval.)
	proved by the shareholders through voting groups. The following statemer each voting group entitled to vote separately on the amendment(s):	nt
"The number of votes east	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were ad action was not required.	opted by the board of directors without shareholder action and shareholde	r
The amendment(s) was/were ad action was not required.	opted by the incorporators without shareholder action and shareholder	
NOVEME Dated	ER 25, 2017	
Dated		
Signature	director, president or officer – if directors or officers have not been	
selecte	ed, by an incorporator - if in the hands of a receiver, trustee, or other cour	t
appoir	nted fiduciary by that fiduciary)	
	THOMAS H. POOLE, JR.	
	(Typed or printed name of person signing)	
	VICE PRESIDENT	
	(Title of person signing)	