2017 FLORIDA PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 267518

Entity Name: KEY TRAVEL SERVICES, INC.

Current Principal Place of Business:

241 SEVILLA AVE.

CORAL GABLES, FL 33134

Current Mailing Address:

PO BOX 149222 ATTN: LEGAL DEPT.

CORAL GABLES. FL 33114-9222 US

FEI Number: 59-0997458 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: C T CORPORATION SYSTEM

08/09/2017

FILED Aug 09, 2017

Secretary of State

CR9288177985

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title D/P Title D/SV

Name ZAKHARIA, YOUSSEF Name LAZOPOULOS, EMANUEL

Address 241 SEVILLA AVENUE, ATTN: LEGAL Address 241 SEVILLA AVE, ATTN: LEGAL

DEPT. DEPT.

City-State-Zip: CORAL GABLES FL 33134 City-State-Zip: CORAL GABLES FL 33134

Title D/V/AS Title S/V/GC

Name TENAZAS, MARISSA R Name JORDAN, BRUCE A

Address 241 SEVILLA AVENUE, ATTN: LEGAL Address 241 SEVILLA AVENUE, ATTN: LEGAL

DEPT. DEPT.

City-State-Zip: CORAL GABLES FL 33134 City-State-Zip: CORAL GABLES FL 33134

Title V/T/AS Title V/AT

Name THOMPSON, PETER M Name VICENTE, MONICA

Address 241 SEVILLA AVENUE, ATTN: LEGAL Address 241 SEVILLA AVE., ATTN: LEGAL

DEPT. DEPT.

City-State-Zip: CORAL GABLES FL 33134 City-State-Zip: CORAL GABLES FL 33134

Title SENIOR VICE PRESIDENT Title CFO/SENIOR VICE PRESIDENT

Name RICE, PAUL J. Name CONTRERAS, RICHARD

Address 241 SEVILLA AVENUE, ATTN: LEGAL Address 241 SEVILLA AVENUE, ATTN: LEGAL

DEPT. DEPT.

City-State-Zip: CORAL GABLES FL 33134 City-State-Zip: CORAL GABLES FL 33134

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: BRUCE A. JORDAN

Electronic Signature of Signing Officer/Director Detail

SECRETARY

08/09/2017

Date