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: ALISA FARBER

Electronic Signature of Signing Officer/Director Detail

DOCUMENT# P96000012045

Entity Name: TOURISM SOLUTIONS, INC.

Current Principal Place of Business:

2400 E. COMMERCIAL BLVD 412 FT LAUDERDALE, FL 33308

Current Mailing Address:

2400 E. COMMERCIAL BLVD 412 FT LAUDERDALE, FL 33308

FEI Number: 65-0677089

Name and Address of Current Registered Agent:

FARBER, ALISA 9080 RIBBONS RIDGE POINT BOYNTON BEACH, FL 33473 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:

Electronic Signature of Registered Agent

Officer/Director Detail :

Title	D	Title	D
Name	FARBER, ALISA	Name	GROSSMAN, JOEL
Address	9080 RIBBONS RIDGE POINT	Address	1010 SEMINOLE DR., APT 601
City-State-Zip:	BOYNTON BEACH FL 33473	City-State-Zip:	FORT LAUDERDALE FL 33304
Title	P		
Title Name	P GROSSMAN, JOEL		

FILED Apr 07, 2014 Secretary of State CC1331163541

Certificate of Status Desired: No

04/07/2014 Date

Date

VP