833497

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

Office Use Only



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SECRETARY OF STATE
TALLAHASSEE, FLORID

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COVER LETTER

SUBJECT:	Chevron Travel Club, Inc.				
Name of Corporation					
DOCUMENT N	UMBER:	833497			
The enclosed State	ement of Change of Registered O	ffice/Agent and fee are submitted for filing.			
Please return all c	orrespondence concerning this m	atter to the following:			
	Lisa Granskie for Incor	o Services, Inc.			
	Name of	Contact Person			
InCorp Services, Inc.					
Firm/Company					
	2360 Corporate Circle Suite 400				
	•				
	Henderson, NV 89074-7722 City/State and Zip Code				
	City/Stai	e and Zip Code			
Elvira.Zavala@drive-america.com E-mail address: (to be used for future annual report notification)					
	E-mail address: (to be used in	or future annual report notification)			
For further inform	ation concerning this matter, plea	se call:			
Lisa Granskie/Incorp Services, Inc. at 702-866-2500 Name of Contact Person Area Code & Daytime Telephone					
INA	inte of Contact Person	Area Code & Daytime Telephone Number			
Enclosed is a \$35.	00 check made payable to the De	partment of State.			
	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

TO:

Amendment Section Division of Corporations

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	provisions of sections 607.0502, 617.0502 inge is submitted for a corporation organiz r to change its registered office or register	zed under the laws of the State of ${ t C}$	alifornia			
1. The name of t	he corporation: Chevron Travel C	lub. Inc.				
2. The principal	office address: 3410 Midcourt #215,	Carrollton, TX 75006				
3. The mailing a	ddress (if different):					
4. Date of incorp	poration/qualification: 12/17/1974	Document number:	833497			
	I street address of the current registered age 1ment of State: (If resigned, enter resigned		the			
	THE PRENTICE-HALL CORPOR	RATION SYSTEM, INC.	6 3			
	1201 HAYS ST Suite 105		000			
	Tallahassee, FL 32301		30			
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):						
	InCorp Services, Inc.		OP.			
	17888 67th Court North					
	P.O. Box NOT acceptable					
	Loxahatchee, FL 33470					
The street addre	ess of its registered office and the street a be identical.	ddress of the business office of its	registered agent,			
Such change we authorized by the	as authorized by resolution duly adopted board, or the corporation has been not	by its board of directors or by an offied in writing of the change.	officer so			
		THOMAS BOUGHTON - F	RESIDENT			
Signatur	e of an officer or director	Printed or typed name and title				
A hereby accept Yurther agree to of my duties, an document is beil corporation has	the appointment as registered agent and to comply with the provisions of all statuted I am familiar with and accept the obliging filed merely to reflect a change in the been notified in writing of this change.	agree to act in this capacity. tes relative to the proper and comp tation of my position as registered registered office address, I hereby	plete performance agent. Or, if this confirm that the			
Lin A	La for Mooro Services Inc.	December 6, 201	0			
Sign	nature of Registered Agent	Date				
If signing on be	half of an entity:					
Lisa Granskie	on behalf of InCorp Services, Inc.					
	ped or Printed Name					

* * * FILING FEE: \$35.00 * * *