

F03000004537

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

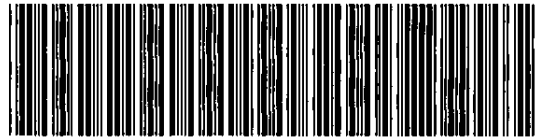
(Business Entity Name)

(Document Number)

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09 DEC -3 AM 9:49

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RACchange

B. CONNELL DEC 07 2009



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 23, 2009

JORGE MONTOYA
79 GRASMER STREET
NEWTON, MA 02458

SUBJECT: VIP RENTAL ESCAPES, INC.
Ref. Number: F03000004537

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

The designation of the registered agent must be at a Florida street address.

The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6906.

Darlene Connell
Regulatory Specialist II

Letter Number: 109A00036279

RECEIVED
2009 DEC 23 AM 8:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: VIP Rental Escapes, Inc.
Name of Corporation

DOCUMENT NUMBER: _____

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Jorge Montoya
Name of Contact Person

VIP Rental Escapes, Inc.
Firm/Company

79 Grasmere St.
Address

Newton, MA 02458
City/State and Zip Code

jam07@rcn.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jorge Montoya at (617) 201-8033
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department 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

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Massachusetts in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: VIP Rental Escapes, Inc.
2. The principal office address: 79 Grasmere St.
Newton, MA 02458
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 6/6/03 Document number: F 0300000 4537

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

Corporation Service Company ~~The Company Corp.~~
1201 Hays St. ~~2711 Centerville Rd. Suite 400~~
Tallahassee, FL 32301 ~~Wilmington, DE 19808~~

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Sarah Montoya ~~Jorge Montoya~~
2080 S. Ocean Dr. ~~79 Grasmere St.~~
Unit # 1805 ~~P.O. Box NOT acceptable~~
Hallandale, FL 33009 ~~Newton, MA 02458~~

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SECRETARY OF STATE
TALLAHASSEE, FL 32301

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

Jorge Montoya Jorge Montoya President
Signature of an officer or director Printed or typed name and title

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

Sarah Montoya 11/26/09
Signature of Registered Agent Date
If signing on behalf of an entity: Jorge Montoya Sarah Montoya
Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314