F0400000587

(Re	equestor's Name)	
(Ac	idress)	
(Ad	idress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
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J4 SEP 15 PH Z: JECKETARY OF ST ALLAHASSEE, FLC

RARO Change

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: South east Vacations Inc. (Name of corporation)
DOCUMENT NUMBER: F0400000587
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:
Harvey J. Spinswitz, Esq. (Name of contact person)
Harvey J. Spinowitz, P.A. (Firm/Company)
1421 Court St., Suita C (Address)
Clearwater FL 33756 (City/state and zip code)
For further information concerning this matter, please call:
Harvey J. Spinawith at (727) 449-9929 (Name of contact person) (Area code & daytime telephone number)
Enclosed is a \$35.00 check made payable to the Department of State.

Street Address: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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 in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Southesit Vacations Inc.
2. The principal office address: 13700 58th ST., BCl, 2, 5-ite 2=9,
3. The mailing address (if different):
4. Date of incorporation/qualification: 130124 Document number: 120400000567
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
Joanna Charron
13700 580 ST. bld. 2, Suite 209
Clearwetter, FL 33760
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Harver J. Spinow: TLESS.
1421 Court 57, Suite C (P.O. Box NOT acceptable)
Chearwater FL 33756
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.
(Signature of an officer or director) STEUCIO Schoen (Printed or typed name and trile)
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.
(Signature of Registered Agent) 9/14/04 (Date)
If signing on behalf of an entity:
(Typed or Printed Name)

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