## Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA00000023

: (850)205-8842

Phone

Fax Number : (850)878-5368

\*\*Enter the email address for this business entity to be used fo: annual report mailings. Enter only one email address please

Email Address:

## REGISTERED AGENT CHANGE JETSETTER, INC.

Certificate of Status	0
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Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu

Help

## **COVER LETTER**

TO: Amend Division	dment Section on of Corporations	
SUBJECT:	Setter, Inc.	
<del></del>	Name of Corp	oration
DOCUMENT	NUMBER:	
The enclosed S	statement of Change of Registered Office/A	gent and fee are submitted for filing.
Please return a	ll correspondence concerning this matter to	the following:
	Sarah Visbeck	
	Name of Contac	t Person
	TripAdvisor, Inc.	
	Firm/Comp	any
	400 1st Ave	
Address		
	Needham, MA, 02494	
	City/State and 2	ip Code
•	svisbeek@iripadvisor.com	•
	E-mail address: (to be used for futur	e annual report notification)
For further info	ormation concerning this matter, please call	
	Name of Contact Person	t ( ) Area Code & Daytime Telephone Number
Enclosed is a \$3	35.00 check made payable to the Departmen	nt 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

CR2E045 (03/12)

J 40 12 11

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

0502, 607.1508, or 617.1508. Flortda Statutes, this
ganized under the laws of the State of Delaware gistered agent, or both, in the State of Florida.
or
eet
Document number: F11000004872
d agent and registered office on file with the gned)
PH C
SSEC 4
gent (If changed) and /or registered office
DT**
h Pine Island Road
fOT acceptable
et address of the business office of its registered agent,
ted by its board of directors or by an officer so notified in writing of the change.
Lauren Kreatz Printed or typed name and title
and agree to act in this capacity. atutes relative to the proper and complete I accept the obligation of my position as registered effect a change in the registered office address, I I in writing of this change.
12/14/15
Dete

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (03/12)