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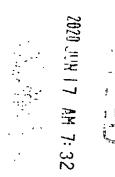
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JUL 2 5 2020 S. YOUNG

## **COVER LETTER**

TO:

Amendment Section Division of Corporations

SUBJECT: Cruise & Tour Planners, Inc.	
Name of Corporation	
DOCUMENT NUMBER: DTN3331398	
The enclosed Statement of Change of Registered Office	e/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter	to the following:
Sharon Emerson	
Name of Contact Person	
Cruise & Tour Planners, Inc	
Firm/Company	
2341 N. 122nd St.	
Address	<del></del>
Seattle, WA 98133	
City/State and Zip Code	<del></del>
sharon@cruiseandtourplanners.com	
E-mail address: (to be used for future annual repor	t notification)
For further information concerning this matter, please of	eatl:
Sharon Emerson	at (2063677657 )
Name of Contact Person	at (2063677657) Area Code & Daytime Telephone Number
Enclosed is a \$35.00 check made payable to the Depart	
Mailing Address: Amendment Section	Street Address: Amendment Section

**Division of Corporations** The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

CR2E045 (04/13)

**Division of Corporations** 

Tallahassee, FL 32314

P.O. Box 6327

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

statement of cr	hange is submitted for a corporation organized under the laws of the State of Washington	_
	der to change its registered office or registered agent, or both, in the State of Florida.	
1. The name of	f the corporation: Cruise & Tour Planners, Inc.	
2. The principa	al office address: 2341 N. 122nd St, Scattle, WA 98133	<del>-</del>
3. The mailing	address (if different):	_
4. Date of inco	prporation/qualification: 01/31/2003 Document number:	
5. The name an	nd street address of the current registered agent and registered office on file with the artment of State: (If resigned, enter resigned)	_
	Elaine Handrigan	ng.
	Elaine Handrigan  7003 142nd Av. N. Lot 348	1 1 1258 14 14
	Lago, FL 33771	;   [[
6. The name an (if changed):	id street address of the new registered agent (if changed) and /or registered office	
	Kimberly Mikula	
	32-1 Alcott Av.	
	P.O. Box NOT acceptable	
	Plant City, FL 33566	
The street addre as changed will	ess of its registered office and the street address of the business office of its registered agent be identical.	,
Such change was authorized by th	as authorized by resolution duly adopted by its board of directors or by an officer so he board, or the corporation has been notified in writing of the change.	
Mara	re of an officer or director State of State of State and like	2k5
hereby accept further agree t of my duties, and locument is bein corporation has	the appointment as registered agent and agree to act in this capacity, to comply with the provisions of all statutes relative to the proper and complete performance of I am familiar with and accept the obligation of my position as registered agent. Or, if this negligible in the new office address, I hereby confirm that the been notified in writing of this change.	e s
Sign	nature of Registered Agent (1-10-20 Date	
	half of an entity:	
Ту	ped or Printed Name	

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