

F22000004531

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

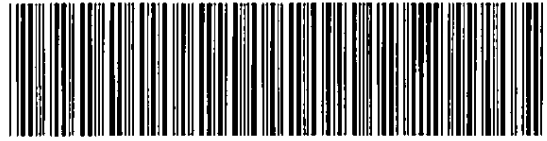
(Document Number)

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STATE

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1568, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of New York in order to change its registered office or registered agent, or both, in the State of Florida

1 The name of the corporation: The Travel Division, Inc
 2 The principal office address: 1200 RXR PLAZA, UNIONDALE, NY 11556

3 The mailing address (if different): _____

4 Date of incorporation/qualification: 7/19/2022 Document number: F22000004531

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)

CF Corporation System
1200 S Pine Island Rd #250
Plantation, FL 33324

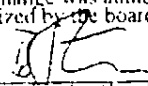
6 The name and street address of the new registered agent (if changed) and or registered office (if changed):

Brian Rodriguez
2 South Biscayne Blvd, Suite 3770
P.O. Box NOT acceptable
Miami, FL 33130

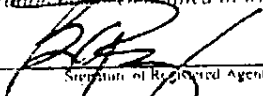
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 FLORIDA DEPARTMENT OF STATE
 TALLAHASSEE, FLORIDA

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.

 Benjamin T. Stevenson, 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.

 NOV 27, 2023
Signature of Registered Agent Date

(If signing on behalf of an entity:

Brian A. Rodriguez
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
 CR2E045 (04-13)

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: THE TRAVEL DIVISION, INC
Name of Corporation

DOCUMENT NUMBER: F22000004531

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

Attention: Jenna Scott
Name of Contact Person
The Travel Division, Inc
Firm/Company
1200 BNR PLAZA
Address
Uniondale, NY 11556
City/State and Zip Code

casecc@archatter.co.uk
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call

Regina Young Name of Contact Person at (860) 969-3200
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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303