Page 1 of 2

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H110002214093)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (850)222-1092

Fax Number

: (850)878-5368

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

Email Address:

## REGISTERED AGENT CHANGE UNIGLOBE TRAVEL (TRANS AMERICA), INC.

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$35.00

https://efile.sunbiz.org/scripts/efilcovr.exe

9/8/2011

## COVER LETTER

	nent Section 1 of Corporations		
SUBJECT:	UNIGLOBE TRAVEL (TR	ANS AMERICA), INC.	
30B00C1	Name of	Corporation	
DOCUMENT I	NUMBER:	195519	
The enclosed Sta	itement of Change of Registered Off	ice/Agent and fee are sub-	mitted for filing.
Please return all	correspondence concerning this matter	er to the following:	
	Debor	ah White	
	Name of C	ontact Person	
	Linial	oha 1194	
	Uniglobe USA Firm/Company		
	18662 MacArthur Blvd, Shite 100 Address		
	Au	uress	
	•	CA 92612	
	City/State i	and Zip Code	· <del></del>
	* •	obaltravel.com	
	E-mail address: (to be used for	future annual report no	tification)
For further inform	nation concerning this matter, please	call:	
	Deborah White	604	718-2600
N	ame of Contact Person	Area Code & Day	718-2600 time Telephone Number
Enclosed is a \$35	.00 check made payable to the Depar	riment of State.	
	Mailing Address: Amendment Section Division of Corporations P.O. Box 6327	Street Addres Amendment S Division of C Clifton Build	Section Corporations
	Tallahassee, FL 32314		ve Center Circle

CR2E045 (8/05)

TEORIC 03/23 2004 CT System Galane

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

statement of c	the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Sta change is submitted for a corporation organized under the laws of the State of Flor order to change its registered office or registered agent, or both, in the State of Flor	ridu		
	of the corporation: UNIGLOBE TRAVEL (TRANS AMERICA), INC.			
2. The principal office address: 101 EAST KENNEDY BLVD #2000, TAMPA FL 33602				
3. The mailing	ng address (if different); 1199 W PENDER STREET SUITE 900, VANCOUVER BC	V6E2R-1 CA		
4. Date of ince	corporation/qualification: 10/05/1987 Document number;	J95519		
	and street address of the current registered agent and registered office on file with the partment of State: (If resigned, enter resigned)	M SER -8 IM B. O. S. O.		
	TAMPA-LAWDOCK, INC.			
	IDI EAST KENNEDY BOULEVARD, SUITE 3400	To the second		
	TAMPA FL 33602 US	THE STATE OF		
6. The name a (if changed)	and street address of the new registered agent (if changed) and /or registered office ():  C T Corporation System	ONDE		
	c/o C T Corporation System, 1200 South Pine Island Road			
	P.O. Box NOT acceptable			
	Plantation, Florida 33324			
The street add is changed wi	dress of its registered office and the street address of the business office of its re ill be identical.	gistered agent,		
Such change v authorized by	was authorized by resolution duly adopted by its board of directors or by an off the board, or the corporation has been notified in writing of the change.	icer so		
	The	Sendy		
hereby accept further agree of my duties, a locument is be corporation by	pt the appointment as registered agent and agree to act in this capacity, le to comply with the provisions of all statutes relative to the proper and comple and I am familiar with and accept the obligation of my position as registered ag leting filed merely to reflect a change in the registered office address, I hereby c pas been notified in writing of this change.	ue performance gent 'Or, if this onfirm that the		
By: Defi	Corporation System 09/08/201/			
	Assistant Secretary Rebooks Barth behalf of an entity:			
و.	Third or Newton Name			

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (8/65)

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