Florida Department of State

Division of Corporations Public Access System

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Division of Corporations

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Account Name : IVAN, COLE & BONNETTE, P.A.

Account Number: I20050000014

Phone : (904) 358-3006

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REGISTERED AGENT CHANGE

DEPARTURES, L.L.C.

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ALLAHASSEE, FLORIDA

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STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

agem, or both, in the sittle of Piorital.	
1. Name of the limited liability company:	Departures, L.L.C.
2. (a) Principal office address of limited liability comp	eany:
(Note: MUST BE STREET ADDRESS)	2871 N. Federal Highway Ft. Lauderdale, FL 33306
(b) Mailing address of limited liability company:	**************************************
(Note: MAY BE POST OFFICE BOX)	2871 N. Federal Highway Ft. Lauderdale, FL 33306
07/24/2003	L03000027190
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown (Registered Agent:	on the records of the Florida Dept. of State:
Registered Office Address:	2871 N. Federal Highway
	<u> జ్ఞాన్ చ</u>
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>N</u>	0 R 9 9
NEW Registered Agent:	Dean G. Pepe
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	1637 N, US Hwy 1
	Ormond Beach ,FL 32174
If the limited liability company is not organized under the confirmed that after the change or changes are made, the and the business office of the registered agent will be ideliability company, it is hereby confirmed that the change of the members of the limited liability company or as other than the change of the operating agreement of the limited liability company or the limited liability company of the limited liability of the limited liabilit	e Florida street address of the registered office entired. Or in the case of a Florida limited
Sandra B. Rossmeyer, Manager Printed or typed name of signee	<u></u>
I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the interpretation of the obligations of my and I am familiar with and accept the obligations of my hapter 608, F.S. Or if this document is being filed to had a complete to the obligation of the limited liability companies. I hereby confirm that the limited liability companies of Registered Agent	l agree to act in this capacity. I further agree to proper and complete performance of my duties, position as registered agent as provided for in nerely reflect a change in the registered office my has been notified in writing of this change.
Division of Corporations, P.O. Box (

INHS18 (05/08)