

**L06000040567**

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

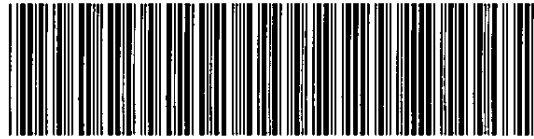
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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**FILED**  
**2009 APR 24 AM 9:00**  
**SECRETARY OF STATE**  
**TALLAHASSEE, FLORIDA**

**C. LEWIS**

APR 27 2009

**EXAMINER**



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

April 6, 2009

ANTHONY RUBEN  
WORLD QUEST RESORT RENTAL MANAGEMENT  
1085 W MORSE BLVD, STE C  
WINTER PARK, FL 32789

SUBJECT: WORLDQUEST RESORT RENTAL MANAGEMENT, LLC  
Ref. Number: L06000040567

We have received your document for WORLDQUEST RESORT RENTAL MANAGEMENT, LLC, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$25.00.

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6047.

Carolyn Lewis  
Regulatory Specialist II  
Registration/Qualification Section

Letter Number: 109A00011472

**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.*

1. Name of the limited liability company: World Quest Resort Rental Management LLC

2. (a) Principal office address of limited liability company: 1085 W. Morse Blvd. Ste C.  
Winter Park, FL - 32789  
(Note: **MUST BE STREET ADDRESS**)

(b) Mailing address of limited liability company: \_\_\_\_\_  
(Note: **MAY BE POST OFFICE BOX**)

4-19-06

L06000040567

3. Date of filing/registration in Florida

4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Agent:

Breagory D. Lee

Registered Office Address:

2009 APR 24 AM 9:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:

NEW Registered Agent:

Anthony Ruben

NEW Registered Office Address:

1085 W. Morse Blvd. Ste C

(**MUST BE FLORIDA STREET ADDRESS**)

Winter Park, FL 32789

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

(Signature of a member or authorized representative of a member)

(Printed or typed name of signee)

*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 obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.*

(Signature of Registered Agent)

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

FILING FEE: \$25.00

INHS18 (05/08)

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SECRETARY OF STATE  
TALLAHASSEE, FL

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