02/11/2014

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Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

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

Email Address:

LLC REGISTERED AGENT CHANGE WORLD TRAVEL ART, LLC

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Page Count	02
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1. SEAVORS FEB 1 2 2014

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

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Pursuant to the provisions of sections 605.0114, 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.

Name of the limited liability company:	Word Travel Art, LLC
 (a) Principal office address of limited liability company (<u>Note: MUST BE STREET ADDRESS</u>) 	y: 145 Tuscanv Bend Street Daytona Beach, Florida 32117
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	226 N. Nova Road Suite 339 Ormond Beach, Florida 32174
April 27, 2010 3. Date of filing/registration in Florida	<u>L10000044756</u> 4. Document number
5. (a) Registered Agent and Registered Office shown on	•
Registered Agent:	Snell Legal
Registered Office Address:	160 E. Granada Boulevard Ormond Beach, Florida 32176
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NE</u>	W Registered Office address:
NEW Registered Agent:	Gary Lee Cummings
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	145 Tuscany Bend Street
If the limited liability company is not organized under the confirmed that after the change or changes are made, the Fand the business office of the registered agent will be identiability company, it is hereby confirmed that the change(s) the members of the limited liability company or as otherwithe operating agreement of the limited liability company. Signature d'a member or authorized reputsentative of a member Chry LEE Cury M(N6S) Printed or typed name of signee I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the printed of a familiar with anadocept the obligations of my positions of the printed liability company. Signature of Registered Agent Division of Corporations, P.O. Box 63	Florida street address of the registered office tical. Or, in the case of a Florida limited) was/were authorized by an affirmative vote of ise provided in the articles of organization or engree to act in this capacity. I further agree to oper and complete performance of my auties, osition as registered agent as provided for in erely reflect a change in the registered office by has been notified in writing of this change.
NHS18 (12/13) FILING FEE: \$	
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