#11000048200

Office Use Only



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COVER LETTER

TO:	Registration Section Division of Corporations			
SUBJ		· · · · · · · · · · · · · · · · · · ·	se and Travel, LLC	
	Name	of Limited	d Liability Company	
Dear S	Sir or Madam:			
The er	nclosed Registered Agent/Register	ed Office	Change and fee(s) are submitted for filing.	
Please	return all correspondence concern	ning this m	natter to the following:	
	Noney E. Porton			
	Nancy E. Barton Name of Person			
	Darton Oncine and Trave			
Barton Cruise and Travel, LLC Firm/Company				
	T min Company			
	1600 Dutahasa Laa	_		
	1689 Dutchess Loo			
	Address			
	The Villages El. 204	00		
The Villages, FL 32162 City/State and Zip Code				
	Chyrotale and Zip code			
E-	bartoncruiseandtravel@gn	nail.com	on)	
For fu	rther information concerning this	matter, ple	ase call:	
	Nancy E. Barton	at (585) 764-0106	
	Name of Person		Area Code & Daytime Telephone Number	
	STREET/COURIER ADDRESS:		MAILING ADDRESS:	
	Registration Section		Registration Section	
	Division of Corporations		Division of Corporations	
	Clifton Building		P.O. Box 6327	
	2661 Executive Center Circle		Tallahassee, Florida 32314	
	Tallahassee, Florida 32301			
	Enclosed is a check for the follo	owing amo	ount:	
	\$25 Filing Fee		\$55 Filing Fee & Certified Copy	

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.

Name of the limited liability company:	arton Cruise and Travel, L	LC		
2. (a) Principal office address of limited liability compa	ny: 1689 Dutche	ss Loop		
(<u>Note: MUST BE STREET ADDRESS</u>)	The Villages, FL 32162			
(b) Mailing address of limited liability company:	1689 Dutchess Lop			
(Note: MAY BE POST OFFICE BOX)	The Villages, FL 32162			
4/22/11	L11000048200)		
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:	United States Corporation	Agents		
Registered Office Address:	13302 Winding Oak Court Suite A Tampa, FL 33612	TILED PLED		
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>N</u>	EW Registered Office address:	F1.09		
NEW Registered Agent:	Nancy E Barton	(D) (C)		
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	1689 Dutchess Loop	<u> </u>		
	The Villages	,FL <u>32162</u>		
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 ide liability company, it is hereby confirmed that the change of the members of the limited liability company or as oth or the operating agreement of the limited liability company. Mary C. B	Florida street address of the registration. Or, in the case of a Florid (s) was/were authorized by an afferwise provided in the articles of	stered office la limited irmative vote		
Nancy E. Barton				
Printed or typed name of signee				
I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the pand I am familiar with and accept the obligations of my parties to 8, F.S. Or, if this document is being filed to a address. I hereby confirm that the limited liability compa	agree to act in this capacity. I for oper and complete performance position as registered agent as practically reflect a change in the reginy has been notified in writing o	urther agree to e of my duties, ovided for in istered office f this change.		
Signature of Rigistered Agent				

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00