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Division of Corporations

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Account Number : 110432003053 Phone : (561)694-8107

Fax Number : (561)694-1639

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LLC REGISTERED AGENT CHANGE TRAVEL RETAIL GROUP BELIZE, LLC

Certificate of Status	0
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H14000272895

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

Pursuant to the provisions of sections 605.0114 or 605.0116, 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.

i.	Na	me of the limited liability company: TRAVEL RETA	AIL GI	ROUP BE	ELIZE, LLC		
2	(a)		a	o)			
٠.,	(u)	Principal office address of limited liability company: (Note: MUST RE STREET ADDRESS)	- \'	·/ _	.Mailing address of limited li (Note: MAY BE POST I		:
		555 NE 185TH STREET Suite 101		555 NE	185TH STREET S	uite 101	
		MIAMI, FL 33179	_	міамі,	FL 33179		
		09/23/2011		L110001	109114		
3.		Date of filing/registration in Florida	4,		Document number		
5	(a)						
₹,	(4)	Registered Agent and Registered Office shown on the records of the	e Plorid	a Dopt. of Sta	ite:		
		M&M RA Services, LLC				<u>9</u>	
		Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			5	YS:	
		3001 SW Third Avenue				<u> </u>	
	Miami)		12 NON 21	유로
		, , ,				Ţ.	중유다
	(b)	Enter name of NEW Registered Agent and/or NEW Registered (_	# =	85
		Enter name of NEW Registered Agent and/or NEW Registered	office ac	ldress:		••	
		Corporate Creations Network Inc.			- -	7	N.S
		NEW Registered Office Address:	· <u>-</u>				
		11380 Prosperity Farms Road #221E			_		
		Palm Beach Gardens, FL	33410)			
the ag	ent v	imited liability company is not organized under the law unge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited liagre authorized by an affirmative vote of the members of cless of organization or the operating agreement of the	s of th the reg bility of the lin limited	e State of Fistered officompany, it mited liability co	ice and the business office is hereby confirmed the ity company or as other ompany. Attorney-in-Fact	at the change(rwise provided	sterea s)
	Signa	nine of a member or authorized representative of a member	_		Printed or typed name of	signce	
	$\{\}$	by accept the appointment as registered agent and agri- tions of all statutes relative to the proper and complete; ligations of my position as registered agent as provided ely reflect a change in the registered office address, I had a provided to the change. Timothy Pratts, Special	ee to ac perform I for in ereby c	et in this can nance of m Chapter of confirm tha chary	spacity. I further agree y duties, and I am Jamil 05, F.S. Or, if this docu at the limited liability co	to comply wit liar with and a iment is being ompany has be	h the accept filed een
S	gnau	re of Registered Agent					