

12/5/13

**L12000078785**

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.**

(((H13000267034 3)))



H130002670343ABC-

RECEIVED  
13 DEC -5 AM 9:30  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DO NOT** hit the REFRESH/RELOAD button on your browser from this page.  
Doing so will generate another cover sheet.

To: Division of Corporations  
Fax Number : (850) 617-6383

From: Account Name : HARVARD BUSINESS SERVICES, INC.  
Account Number : 120080000045  
Phone : (302) 645-7400  
Fax Number : (302) 645-1280

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2013 DEC -5 AM 8:42

FILED

**\*\*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  
BED & VACATIONS LLC**

Certificate of Status	1
Certified Copy	0
Page Count	02
Estimated Charge	\$30.00

H13000267034 3

# 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: Bed & Vacations LLC

2. (a) Principal office address of limited liability company: 1801 Collins Avenue  
(Note: MUST BE STREET ADDRESS)

Apt. 532  
Miami Beach, FL 33139

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

1801 Collins Avenue  
Apt. 532  
Miami Beach, FL 33139

8/13/2012

L12000078785

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:

Rapan, Patricia B

Registered Office Address:

1900 Meridian Avenue  
Apt 202  
Miami Beach, FL 33139

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

NEW Registered Agent:

Registered Agents Inc.

NEW Registered Office Address:

(MUST BE FLORIDA STREET ADDRESS)

3030 N. Rocky Point Dr.  
Ste 160A  
Tampa, FL 33607

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]  
 Signature of a member or authorized representative of a member

Wanda G. Gera  
 Printed or typed name of signer

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)

H13000267034 3

FILED  
 2013 DEC -5 AM 8:42  
 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA