# L21299

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(business Enuty Name)
(Document Number)
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SECRETARY OF STATE ALLAHASSEE, FI ORID,

T. Roberts JAN 17 2007

## THE SCHINNER LAW GROUP

96 Jessie Street San Francisco, CA 94105 Tel 415-369-9050 Fax 415-369-9053 Schinner@Schinner.com

January 9, 2007

File No: 187-1

Florida Department of State Division of Corporations Attn: Tina Roberts P.O. Box 6327 Tallahassee, FL 32314

Re: LIBERTY VOYAGES, INC. / L21299

Dear Ms. Roberts:

In connection with the above referenced corporation, we have received the rejection letter from your office; thank you. Thus, enclosed please find the following:

- 1) Florida Department of State Rejection Letter; and
- 2) Original and one copy of the Statement of Change of Registered Agent (the "Statement") with the Registered Agent Consent Form attached for filing;

Please note that the check in the total amount of \$35.00 for the filing fee has already been cashed by your office at the time you first received the Statement.

Upon filing, please return a stamped-filed copy of the Statement to the undersigned in the stamped, self-addressed envelope provided for your convenience.

Please contact me should you have any questions.

Thank you for your assistance.

00 :8 TO LINE Englosures

Vanessa) Furner
Law Clerk



### FLORIDA DEPARTMENT OF STATE **Division of Corporations**

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Letter Number: 607A00000324

January 3, 2007

MICHAEL G. SCHINNER THE SCHINNER LAW GROUP 96 JESSIE STREET SAN FRANCISCO, CA 94105

SUBJECT: LIBERTY VOYAGES, INC.

Ref. Number: L21299

We have received your document for LIBERTY VOYAGES, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return 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) 245-6892.

Tina Roberts **Document Specialist** 

Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314

## **COVER LETTER**

TO: Amendment Section Division of Corporations	
SUBJECT: Liberty Voyages, Inc. (Name of Corporati	on)
DOCUMENT NUMBER: L21299	· ·
The enclosed Statement of Change of Registered Office/Agent	and fee are submitted for filing.
Please return all correspondence concerning this matter to the f	_
, -	9
Michael G. Schinner	
(Name of Contact Per	rson)
The Schinner Law Group (Firm/Company)	
(t inii Company)	•
96 Jessie Street	
(Address)	
San Francisco, CA 94105	
San Francisco, CA 94105 (City/State and Zip C	ode)
For further information concerning this matter, please call:	
Michael G. Schinner	115 360-0050
(Name of Contact Person) at (2	Area Code & Daytime Telephone Number)
Enclosed is a \$35.00 check made payable to the Department of	State.
Mailing Address: Amendment Section	Street Address: Amendment Section
Amendment Section Division of Corporations	Amendment Section Division of Corporations
P.O. Box 6327	Clifton Building
Tallahassee, FL 32314	2661 Executive Center Circle

Tallahassee, FL 32301

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	provisions of sections 607.0302, 617.0302, 607.1308, or 617.1308, Florida Statutes, this ange is submitted for a corporation organized under the laws of the State of Florida er to change its registered office or registered agent, or both, in the State of Florida.
1. The name of	the corporation: Liberty Voyages, Inc.
2. The principal	office address: 401 S.W. 8th Street Fort Lauderdale, FL 33315
3. The mailing a	address (if different): C/O THI 201 Stuyvesaut Drive, San Anselmo, CA 94960
4. Date of incor	poration/qualification: October 5, 1989 Document number: L21299
	d street address of the current registered agent and registered office on file with the artment of State:
	Cico, Benedetto
	401 S.W. 8th Street
	Fort Lauderdale, FL 33315
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered office  Paracorp Incorporated
	236 East 6th Avenue (P.O. Box NOT acceptable)
	Tallahassee, FL 32303
The street address changed will	ess of its registered office and the street address of the business office of its registered agent, I be identical.
Such change was authorized by t	ras authorized by resolution duly adopted by its board of directors or by an officer so the board, or the corporation has been notified in writing of the change.  Benedetto Cico, President
(Signat	ture of an officer or director) (Printed or typed name and title)
* *	t the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and complete performance nd I am familiar with and accept the obligation of my position as registered agent. Or, if this ing filed merely to reflect a change in the registered office address, I hereby confirm that the is been notified in writing of this change.
T	-
•	ignature of Registered Agent) (Date)
If signing on be	ehalf of an entity;
	Typed or Printed Name)
	* * * FILING FEE: \$35.00 * * *

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (8/05)

## STATE OF FLORIDA

## REGISTERED AGENT CONSENT FORM

DATE: DECEMBER 20, 2006

ENTITY NAME: LIBERTY VOYAGES, LLC

### **REGISTERED AGENT NAME AND ADDRESS:**

Paracorp Incorporated 236 East 6<sup>th</sup> Avenue Tallahassee, FL 32303

**Paracorp Incorporated**, having been designated to act as Statutory Agent, hereby consents to act in that capacity for the above-referenced entity until removed or resignation is submitted in accordance with the Florida Revised Statutes.

Denise Zollner, Assistant Secretary

Paracorp Incorporated