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COVER LETTER

TO:	Registration Section Division of Corporations				
SURT	D-TOURS: LUXURY THEME P.	ARK TOURS LLC			
Name of Limited Liability Company					
Dear S	ir or Madam:				
The en	closed Registered Agent/Registered C	Office Change and	l fee(s) are submitted for filing.		
Please	return all correspondence concerning	this matter to the	following:		
Justin (Chapman				
	Name of Person				
D-TOU	JRS: LUXURY THEME PARK TOURS	LLC			
	Firm/Company				
400 Cl	ematis St Suite 206				
	Address		 '		
West P	alm Beach, Florida 33401				
	City/State and Zip Code	5			
	dtoursorlando.com	. ••			
E	E-mail address: (to be used for future a	innual report noti	fication)		
For fu	rther information concerning this matt	er, please call:			
Justin (Uhapman	407 at (205-9762		
	Name of Person		Area Code & Daytime Telephone Number		
	Mailing Address: Registration Section		Street Address: Registration Section		
	Division of Corporations		Division of Corporations		
• •	P.O. Box 6327 "	· . · · - · · ·	The Centre of Tallahassee		
	Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810		
٠, ر. ٠	ring at the first of the		Tallahassee, FL 32303		
	Enclosed is a check for the followi	ng amount:	•		
			respection For & Contilled Comme		
-	□ \$25 Filing Fee		\$55 Filing Fee & Certified Copy		
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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.

1. N	ame of the limited liability company: D-TOURS: LUX	XURY THEME PARK TOURS LLC
2. (a)	400 Clematis St - Suite 206	(b) 312 Palmetto St
(_,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	West Palm Beach	West Palm Beach
	Florida 33401	Florida 33405
	06/23/23	L23000303666
3.	Date of filing/registration in Florida	4. Document number
5. (a	NORTHWEST REGISTERED AGENT LLC	
J. (a	Registered Agent and Registered Office shown on the records of 7901 4TH ST N	of the Florida Dept. of State:
	Registered Office Address (MUST BE FLORIDA STREET) STE 300	
	ST. PETERSBURG	FL 33702
(b)	Debra Wilkinson Botwin, LLC Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u> 1100 S. Orange Ave., Suite A	red Office address:
	NEW Registered Office Address:	
		<u> </u>
, -	Orlando F	FL
chang agent was/w the ar	c or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited leaves authorized by an affirmative vote of the members ticles of organization or the operating agreement of the attree of a member or authorized representative of a member	laws of the State of Florida, it is hereby confirmed that after the he registered office and the business office of the registered liability company, it is hereby confirmed that the change(s) is of the limited liability company or as otherwise provided in the limited liability company. Justin Chapman Printed or typed name of signee agree to act in this capacity. I further agree to comply with the
the of	lians at all statutes relative to the proper and complet	gree to act in this capacity. I fail the daree to comply with the leverformance of my duties, and I am familiar with and accept led for in Chapter 605, F.S. Or, if this document is being filed i hereby confirm that the limited liability company has been
31900	nd of imposition vigant.	·
		D. Box 6327 • Tallahassee, FL 32314 FEE: \$25.00

INHS18 (2/14) .