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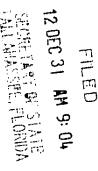
(Re	questor's Name)	
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PICK-UP	WAIT	MAIL
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Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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K.SALY EXAMINER JAN - 4 2013

COVER LETTER

TO: Registration Section Division of Corporations

 $_{\text{SUBJECT:}}$ A 2 Z VACATIONS, LLC.

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Virginia McGuire

Name of Person

Start 2 Finish Travel Management

Firm/Company

4144 N Central Expressway-Suite 700

Address

Dallas, TX 75204

City/State and Zip Code

vmcguire@start2finishtravel.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Virginia McGuire

at (9/2)

385-1118

Name of Person

Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

■ \$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.

1. Name of the limited liability company: A2ZVACATIONS.LLC))-		
2 (a) Drivainal office address of limited liability commons			
 (a) Principal office address of limited liability company (Note: MUST BE STREET ADDRESS) 	ny:618 E. South Street # 500		
(Note: MUST BE STREET ADDRESS)	Orlando, FL 32801	FOR A	
		13	
(b) Mailing address of limited liability company:			
(Note: MAY BE POST OFFICE BOX)	4144 N Central Expressway-Suite 700	70 P	
	Dallas, TX 75204	719	
		700	
12/21/2012	M12000007147	22 5	
3. Date of filing/registration in Florida	4. Document number	P	
5. (a) Registered Agent and Registered Office shown on t	he records of the Florida D	ept. of State:	
Registered Agent:	oana worgan	· · · · · · · · · · · · · · · · · · ·	
Registered Office Address:	124 Heritage Circle		
	Panama City Beach, FL 32407		
•			
(b) Enter name of NEW Registered Agent and/or NEW	W Registered Office addre	<u>ess</u> :	
NEW Registered Agent:	C T Corporation Systems		
NEW Registered Office Address:	1200 South Pine Island Road		
(MUST BE FLORIDA STREET ADDRESS)			
THE STATE OF THE S	Plantation	.FL 33324	
If the limited liability company is not organized under the laconfirmed that after the change or changes are made, the Fl and the business office of the registered agent will be identifiability company, it is hereby confirmed that the change(s) the members of the limited liability company or as otherwise the operating agreement of the limited liability company. Signature of a member or authorized representative of a member	orida street address of the rical. Or, in the case of a Flo	egistered office	
Printed for typed name of signee	_		
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the property and I am familiar with and accept the obligations of my polychapter 608, F.S. Or, if this document is being filed to met address, I hereby confirm that the limited liability company	gree to act in this capacity. Sper and complete perform Sition as registered agent a rely reflect a change in the has been notified in writin	I further agree to ince of my duties, s provided for in registered office g of this change.	

Registered Agent's Signature (REQUIRED)

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