M13000003695

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL.
(Bu	siness Entity Na	me)
(Do	cument Number)
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COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: IMS Vacation Name of Lin	nited Liability Company	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Office Char	nge and fee(s) are submitted for filing.	
Please return all correspondence concerning this matte	r to the following:	
Waylon White Name of Person		
IMS Vacations LCC Firm/Company		
120 Fox Run Dr. Address		
Natchitoches LA 71-	157-7881	
E-mail address: (to be used for future annual repo	ort notification)	
For further information concerning this matter, places	ealt:	
Waylon Unite at 1	318) 6/7 756 Area Code & Daytime Telephone Number	
Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAH INC 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	

INHS18 (2/14)

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.

	me of the limited liability company:
2. (a)	120 FOX RUN Dr (b) 120 FUX RUN Dr
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	<u>(</u>
	Alaman and Alaman I ambugan
	Natchitoches LA 71457-7881 Natchitoches LA 71457-7
	10.0
	6/11/13 M13 00000 3695
3.	Date of filing/registration in Florida 4. Document number
ა. (a)	James Collins
J. (a)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
	Registered Office Address MUST BE FLORIDA STREET ADDRESS
	$q \rightarrow \infty$
	MAR AR
	North Man: Beach, FL
	A contract to the contract of
(b)	Andy Small
	Enter name of NEW Rogistered Agent and/or NEW Registered Office address:
	,
	NEW Registered Office Address:
	Miam. Reach , FL 33141
	M
	Miani Beach , FL 33/4
ii the ii	imited frability company is not organized under the laws of the State of Florida, it is hereby confirmed that after
the cha	inge or changes are made, the Florida street address of the registered office and the business office of the registered villabe identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s)
was/we	ere authorized by an affirmative vote-of the members of the limited liability company or as otherwise provided in
the arti	cles of organization or the operating agreement of the limited liability company.
	James Collingate Tames Collingate Timed or typed name of figure
Signai	ll J
l herel provisi	by actept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the ons of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept
the obli to mere	ons of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept igations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed Ply reflect a change in the registered office address, I hereby confirm that the limited liability company has been
notified	I in writing of this change.
Sinn	Andre Dmall te of Kegippred Agent
	····