## P01000044170

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SECRETARY OF STATE

## **COVER LETTER**

Division of Corporations				
SUBJECT: US SCANDINAVIA TRAVEL 2 TOURISM INC (Name of Corporation)				
DOCUMENT NUMBER: POI 0000 44170				
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
Per Nordstrom (Name of Contact Person)				
US Scandinavia Travel & Tourismine (Firm/Company)				
790 Placid Lulee Dr (Address)				
Ospress FL 34229 (City/State and Zip Code)				
For further information concerning this matter, please call:				
Per Nordsfrom at (941) 966 1/60 (Name of Contact Person) at (Area Code & Daytime Telephone Number)				
Enclosed is a \$35.00 check made payable to the Department of State.				
Mailing Address: Amendment Section Division of Corporations P.O. Box 6327  Tallahassee, FL 32314  Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle				

Tallahassee, FL 32301

TO:

Amendment Section

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

e , , ;

Pursuant to the provisions of sections 607.0502, 617.0502, 607.15		
statement of change is submitted for a corporation organized unde in order to change its registered office or registered agen.	-	
		•
1. The name of the corporation: US SCANDINAL	11A TRAVEL	& TOURISM IN
2. The principal office address: 790 Placid Lake	DC_	<del></del>
DSprey, FL 34229		
3. The mailing address (if different):		
4. Date of incorporation/qualification: 5/2/2001 Doc	cument number: PC	010000 44170
5. The name and street address of the current registered agent and r Florida Department of State:		
Corporation Services	. Company	<del>/_</del>
1201 Hays street		
Tallahassee FL 3	2301-25°E	2001 F
Florida Department of State:  Corporation Services  1201 Hays Street  Tallahassee FL 3  6. The name and street address of the new registered agent (if changed):	ged) and /or registered	FILE 2007 MAR 22 P
ter Nacdetrom		ro p
790 Placid Lake DC		PH 4: 3  OF STATE E. FLORI
790 Placid Lake Dr (P.O. Box NOT acceptable) OSDrey FL 34229		
The street address of its registered office and the street address of as changed will be identical.		
Such change was authorized by resolution duly adopted by its board by the board, or the corporation has been notified in v		
10 1		
(Signisture of an officer or director)	Printed or typed name a	
I hereby accept the appointment as registered agent and agree to further agree to comply with the provisions of all statutes relation may be described in a familiar with and accept the obligation of document is being filed merely to reflect a change in the register corporation has been notified in writing of this change.		omplete performance red agent. Or, if this reby confirm that the
	3/19-07	
(Signature of Registered Agent)  If signing on behalf of an entity:	(Date)	
(Typed or Printed Name)	·	
* * * FILING FFF. \$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)