

PO7000100309

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

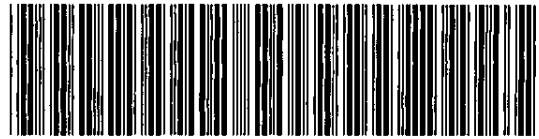
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Deborah Longworth
Advised to make
All corrections

Office Use Only



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02/04/08--01023--004 **35.00

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
08 FEB 14 PM 2:00

RA/RO/chg
@ 2/14/08

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Florida Reservation Services Inc
(Name of Corporation)

DOCUMENT NUMBER: P07000100309

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:

Deborah Longworth
(Name of Contact Person)

Florida Reservation Services Inc
(Firm/Company)

P.O. Box 5237
(Address)

Deltona, USA, Florida 32728
(City/State and Zip Code)

For further information concerning this matter, please call:

Deborah Longworth at (321) 600-0605
(Name of Contact Person) (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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 6, 2008

DEBORAH LONGWORTH
FLORIDA RESERVATION SERVICES INC.
P.O. BOX 5237
DELTONA, FL 32728

SUBJECT: FLORIDA RESERVATION SERVICES INC
Ref. Number: P07000100309

We have received your document for FLORIDA RESERVATION SERVICES 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):

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

Florida law requires the street address of the principal office and, if different the mailing address of the entity. A post office box is not acceptable for the principal office.

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) 245-6964.

Irene Albritton
Regulatory Specialist II

Letter Number: 808A00007933

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Florida Reservation Services Inc
2. The principal office address: 870-43 Saxon Blvd
3. The mailing address (if different): P.O. Box 5237
Deltona, USA, Florida 32728
4. Date of incorporation/qualification: 9/10/2007 Document number: P07000100309
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Deborah Waldorf

- 870-43 Saxon Blvd

Orange City, FL 32763

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Deborah Longworth

870-43 Saxon Blvd,

(P.O. Box NOT acceptable)

Deltona, Florida 32728

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.


(Signature of an officer or director)

Robert Friedman

(Printed or typed name and title)

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.


(Signature of Registered Agent)

January 30th, 2008

(Date)

If signing on behalf of an entity:

Deborah Longworth

(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)

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SECRETARY OF CORPORATIONS
DIVISION OF CORPORATIONS
08 FEB 14 PM 2:00