## Po8000081753

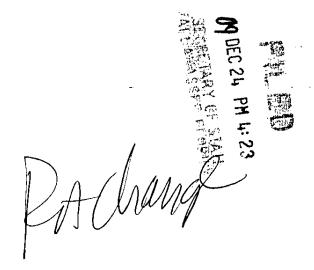
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## **COVER LETTER**

TO:	Amendment Section Division of Corpo	on rations					
SUBJI	ЕСТ:	Seeusatours S	South, Inc	<del> </del>			
DOCL	JMENT NUMBER	:P08	000081753	<del></del>			
The en	closed Statement of	Change of Registered Offic	e/Agent and fee are submi	tted for filing.			
Please	return all correspon	dence concerning this matte	r to the following:				
			Aviles				
		Name of Co	ntact Person	· · · ·			
		_					
		Seeusatours Firm/Co	s South, Inc.				
		rumze	ompany				
		5775 Blue Lagor	on Drive Ste 145				
		Add	ress	<del></del>			
		Miami F	1 33126				
	Miami, Fl. 33126 City/State and Zip Code						
		miami@aaau	ootouro oom				
	E-mai	miami@seeu address: (to be used for f		fication)			
	D mai	addiess (to se asea io	<b></b>	,			
For fur	ther information co	ncerning this matter, please	call:				
	Pabl	o Aviles	at ( 305 )	406 1777			
	Name of C	ontact Person	Area Code & Dayt	406 1777 ime Telephone Number			
Enclos	ed is a \$35.00 check	made payable to the Depar	tment of State.				
	D P.	ailing Address: mendment Section ivision of Corporations O. Box 6327 allahassee, FL 32314	Street Address Amendment S Division of Co Clifton Buildi 2661 Executiv	ection orporations			
	• `	,	Tallahassee, F				

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

statement of cha	provisions of sections 60 ange is submitted for a co er to change its registere	orporation organize	d under the laws of the	State of	this ——
1. The name of	the corporation: Seeu:	satours South	, Inc.		
2. The principal	office address: 5775 E	Blue Lagoon Driv	re Ste 145		·
3. The mailing a	address (if different): Sa	me			
4. Date of incor	poration/qualification:	09/04/2008	Document number:	P080000	081753
	d street address of the cur rtment of State: (If resign		t and registered office	on file with the	
	Gerardo Arino				
	4001 NW 97 Ave S	Ste 203			
	Miami,Fl. 33178			Ž.	0
6. The name and (if changed):	d street address of the nev	w registered agent (i	f changed) and /or regi	stered office	9 DEC 24
	Gerardo Arino				
	5775 Blue Lagoon	Drive Ste 145 P.O. Box NOT acc			t Table
	Miami, Fl. 33126	7.0, Box NoT acc	срасне		23
The street addresses changed will	ess of its registered office be dentical.	e and the street add	ress of the business of	ffice of its register	red agent,
Such change wa authorized by th	as authorized by resoluti ne board, or the corporat	on duly adopted by tion has been notific	its board of directors ed in writing of the ch	or by an officer sange.	o
Senatur	of an obuse or director		6ERARDO Printed or typed	ARINO Frame and title	Privolen
I hereby accept I further agree t of my duties, an document is bei corporation has	the appointment as region comply with the provided Lam familiar with and filed merely to reflect feen natified in writing	stered agent and a sions of all statutes l accept the obligat t a change in the re g of this change.	aree to act in this can	acity	rformance Or, if this n that the
			Dee 2	1,2007	
للكسد	native of Registered Agent		Date	:	
	half of an entity:				
	nod or Printed Name	<del></del>			

\* \* \* FILING FEE: \$35.00 \* \* \*