

PO9000006878

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

(Business Entity Name)

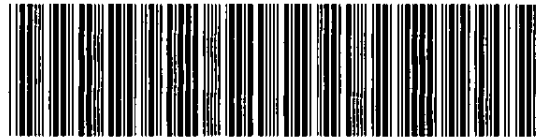
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

R.A.

TB

2-23-09

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Inka Travelers Company  
(Name of Corporation)

**DOCUMENT NUMBER:** PO9.000006878

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:

Sharon Spry  
(Name of Contact Person)

Inka Travelers Company  
(Firm/Company)

1132 SW 42 St  
(Address)

Cape Coral, FL 33914  
(City/State and Zip Code)

For further information concerning this matter, please call:

Sharon Spry at (239) 945-7467  
(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

**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: Inka Travelers Company
2. The principal office address: 1132 SW 42 St  
Cape Coral, FL 33914
3. The mailing address (if different): 275 Snell Street  
Sonoma, CA 95370
4. Date of incorporation/qualification: 1.23.09 Document number: P09 000006878
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

Sharon Spry

1132 SW 32 St

Cape Coral, FL 33914

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

Sharon Spry

1132 SW 42 St

(P.O. Box NOT acceptable)

Cape Coral, FL 33914

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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.

Sharon Spry  
(Signature of an officer or director)

Sharon Spry, President  
(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.

Sharon Spry  
(Signature of Registered Agent)

2.10.2009  
(Date)

If signing on behalf of an entity:

Sharon Spry  
(Typed or Printed Name)

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