## P13000063231

(Re	equestor's Name)	
(Ac	ddress)	
(Ac	ddress)	
(Ci	ity/State/Zip/Phone #)	
PICK-UP	WAIT MAIL	
(Bu	usiness Entity Name)	
(Document Number)		
Certified Copies	Certificates of Status	
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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

SUBJECT: Air Travel Solutions, Inc.

Name of Corporation

DOCUMENT NUMBER: P13000063231

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:

Tamara Burton

Name of Contact Person

U.S. Corporation Services, Inc.

Firm/Company

2200 B Douglas Blvd., Suite 100

Address

Roseville, CA 9566

City/State and Zip Code

info@uscorporation.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Tamara Burton

.,800

352-0533

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

statement of ch	e provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida State angle is submitted for a corporation organized under the laws of the State of $\frac{Flor}{Flor}$	ida	_
	ler to change its registered office or registered agent, or both, in the State of Flor	ida.	
1. The name of	the corporation: Air Travel Solutions, Inc.		
2. The principa	al office address: 134 Kenwood Avenue, Clearwater, FL 33755	<del> </del>	
3. The mailing	address (if different): 2200 8 DOUGLAS BLVD., SUITE 100		
<b>-</b>	ROSEVILLE, OF 95661		
4. Date of incom	rporation/qualification: 07/31/2013 Document number: P130000	63231	
5. The name an	nd street address of the current registered agent and registered office on file with t artment of State: (If resigned, enter resigned)	he	
	Danny Halverson		
	107 1/2 MLK Avenue		
	Clearwater, Florida 33755		,
6. The name ar (if changed):	nd street address of the new registered agent (if changed) and /or registered office :	. <b>उ</b>	*ACK
	Danny Halverson	ر م	
	134 Kenwood Avenue	784 45	20 miles
	P.O. Box NOT acceptable	· · · · · · · · · · · · · · · · · · ·	//.
	Clearwater, Florida 33755	<b></b>	1,
The street addr as changed wil	ress of its registered office and the street address of the business office of its registered.	gistered age	nt,
Such change wantborized by	was authorized by resolution duly adopted by its board of directors or by an office board, or the corporation has been notified in writing of the change.	cer so	
Childy	Cindy Halverson, Presider  Printed or typed name and title	nt	_
I hereby accept further agree performance of agent. Or, if it	of the appointment as registered agent and agree to act in this capacity.  The to comply with the provisions of all statutes relative to the proper and complet of my duties, and I am familiar with and accept the obligation of my position as this document is being filed merely to reflect a change in the registered office as that the corporation has been notified in writing of this change.	te registered Idress, I	
Donny	Halner of Registered Agent 2013		_
If signing on b	ignature of Registered Agent Date sehalf of an entity:		
<i>33</i>	·		
	Typed or Printed Name		