14000015203

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LAW OFFICES OF PETER P. MENDEZ, P.A.

December 10, 2014

Department of State Division of Corporations Corporate Filings P.O. Box 6327 Tallahassee, FL 32314

e: AAZ Tour Operator and Transportation Corp.

Dear Sir/Madam:

Enclosed please find the proper form and fee for the dissolution of the aforementioned corporation.

Should you have any questions, do not hesitate in contacting our office, otherwise plea

Very truly yours,

Peter P. Mendez

Enclosures

PPM/sg

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

Pursuant to the provisions of sections 607.0502, 617.050.		
statement of change is submitted for a corporation organ		
in order to change its registered office or registe	*	
1. The name of the corporation: AAZ TOUR OPERAT	TOR AND TRANSPORTATION CORP.	
2. The principal office address: 1212 HIAWASSEI	E ROAD, #528	
ORLANDO, FLORIDA 32835		
3. The mailing address (if different): 1622 HILLCRI	EST STREET	
ORLANDO, FLORIDA 32803		
4. Date of incorporation/qualification: 02/17/2014	Document number: P14000015203	
5. The name and street address of the current registered a Florida Department of State: (If resigned, enter resigned	-	
ELIAS AZEM FILHO		
1212 HIAWASSEE ROAD,	#528	JU 71
ORLANDO, FLORIDA 3283	5	AL OFC
6. The name and street address of the new registered ager (if changed):		12 州
PEDRO P. MENDEZ		ထဲ
1622 HILLCREST STREET		80
P.O. Box NOT	•	
ORLANOD, FLORIDA 3280	3	
The street address of its registered office and the street as changed will be identical.	address of the business office of its registered agen	it,
Such change was authorized by resolution duly adopted authorized by the board, or the corporation has been no	by its board of directors or by an officer so tified in writing of the change.	
A (In)	ELIAS AZEM FILHO	
I hereby/accept the appointment as registered agent an I further agree to comply with the provisions of all state performance of my auties, and I am familiar with and a agent. Or, if this document is being filed merely to refl hereby confirm that the corporation has been notified in	utes relative to the proper and complete accept the obligation of my position as registered lect a change in the registered office address, l	
	AUGUST 26, 2014	
Signature of Registered Agent	Date	
If signing on behalf of an entity:		
PEDRO P. MENDEZ		
Typed or Printed Name * * * FILING FE	E: \$35.00 * * *	
P. W.A.L.A.D. E. E.	and works to	

Make checks payable to Florida Department of State
Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314