

P150000087247

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

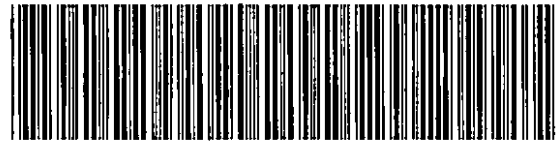
(Business Entity Name)

(Document Number)

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2018 MAY 21 PM 2:30

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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MAY 22 2018

I ALBRITTON

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Extraordinary Vacations USA, Inc. Next trip Holdings, Inc
Name of Corporation

DOCUMENT NUMBER: P15000087247

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:

William Kerby

Name of Contact Person

Extraordinary Vacations USA, Inc.

Firm/Company

2893 Executive Park Drive, Ste 201

Address

Weston, FL 33331

City/State and Zip Code

gmiller@nxoi.com

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

For further information concerning this matter, please call:

Jessy Miller

Name of Contact Person

at (954) 888-9779

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

May 3, 2018

WILLIAM KERBY
EXTRAORDINARY VACATIONS
2893 EXECUTIVE PARK DRIVE - STE. 201
WESTON, FL 33331

SUBJECT: NEXTTRIP HOLDINGS, INC.
Ref. Number: P15000087247

We have received your document for NEXTTRIP HOLDINGS, 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):

The current name of the entity is as referenced above. Please correct your document accordingly.

The registered agent must sign accepting the designation.

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) 245-6050.

Irene Albritton
Regulatory Specialist II

Letter Number: 118A00009156

RECEIVED
18 MAY 21 PM 12:35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**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: Extraordinary Vacations USA, Inc.
2. The principal office address: 2893 Executive Park Drive, Ste 201, Weston, FL 33331

3. The mailing address (if different): _____

4. Date of incorporation/qualification: 4/25/2018 Document number: P15000087247

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)

Extraordinary Vacations USA, Inc.

2690 Weston Road, Ste 200

Weston, FL 33331

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

Extraordinary Vacations USA, Inc.

2893 Executive Park Drive, Ste 201

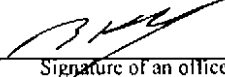
P.O. Box NOT acceptable

Weston, FL 33331

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2018 MAY 21 PM 4:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

William Kerby / CEO

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

May 17, 2018
Date

If signing on behalf of an entity:

Typed or Printed Name

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