

P17000005978

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer

Office Use Only



900296948269

03/28/17--01030--006 \*\*35.00

FILED

2017 MAR 28 AM 9:26

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

RA/R0/chs

MAR 30 2017

I ALBRITTON

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** CELEBRITY TRIP EXPERIENCE, INC

Name of Corporation

**DOCUMENT NUMBER:** P17000005978

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:

**JODHI BRYAN**

Name of Contact Person

**CELEBRITY TRIP EXPERIENCE, INC**

Firm/Company

**1027 SW 122ND AVE**

Address

**PEBROKE PINES, FL 33025**

City/State and Zip Code

**deneanc82@gmail.com**

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

For further information concerning this matter, please call:

**JODHI BRYAN**

Name of Contact Person

at ( **919** ) **904-6668**

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: CELEBRITY TRIP EXPERIENCE, INC
2. The principal office address: 1027 SW 122ND AVE  
PEMBROKE PINES, FL 33025
3. The mailing address (if different): SAME AS ABOVE
4. Date of incorporation/qualification: 01/17/2017 Document number: P17000005978
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)

TREPHENE BROWN

2207 STOTESBURY WAY

WELLINGTON, FL 33414

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

JHODI BRYAN

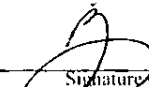
1027 SW 122ND AVE

P.O. Box NOT acceptable

PEMBROKE PINES, FL 33025

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

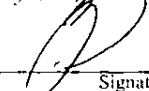
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

  
\_\_\_\_\_  
Signature of an officer or director

JHODI BRYAN MNGR

\_\_\_\_\_  
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

3/22/17  
\_\_\_\_\_  
Date

If signing on behalf of an entity:

JHODI BRYAN

\_\_\_\_\_  
Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE  
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

CR2E045 (03/12)

**FILED**  
**2017 MAR 28 AM 9:26**  
**SECRETARY OF STATE**  
**TALLAHASSEE, FLORIDA**