P94000065337

•			
(Requestor's Name)			
(Address)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Business Linty Haine)			
(Document Number)			
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SECKETARY OF STATE

JUN 05 2012 T. ROBERTS

COVER LETTER

TO:	Amendment Section Division of Corporations	
SUBJI	CCT: Deslin Hotels Inc. Name of Corporation	
DOCU	MENT NUMBER: P94000065337	
The en	closed Statement of Change of Registered Office/Agent and fee are submitted for filing.	
Please	return all correspondence concerning this matter to the following:	
	William N. Gambert Name of Contact Person	
	William N. Gambert, Esquire Firm/Company	
	428 N. Halifax Avenue Address	
Daytona Beach, FL 32118 City/State and Zip Code		
	Sky/State tild 2/p code	
	E-mail address: (to be used for future annual report notification)	
For fur	her information concerning this matter, please call:	
	William N. Gambert at (386) 257-9873 Name of Contact Person Area Code & Daytime Telephone Number	
	Name of Contact Person Area Code & Daytime Telephone Number	
Enclose	d 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 change is submitted for	ons 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this or a corporation organized under the laws of the State of Florida
in order to change its reg	istered office or registered agent, or both, in the State of Florida.
1. The name of the corporation:	Deslin Hotels, Inc.
2. The principal office address:	900 N. Atlantic Avenue
	Daytona Beach, FL 32118
3. The mailing address (if different):
4. Date of incorporation/qualificati	on: 9/6/94 Document number: P94000065337
5. The name and street address of t Florida Department of State: (If	he current registered agent and registered office on file with the resigned, enter resigned)
David	I C. Robinson
1326	S. Ridgewood Avenue, STE 6
Dayto	ona Beach, FL 32114
6. The name and street address of to (if changed):	he new registered agent (if changed) and /or registered office
Will:	Lam N. Gambert
428_1	N. Halifax Avenue
Down	P.O. Box NOT acceptable
	ona Beach, FL 32118
The street address of its registered as changed will be identical.	office and the street address of the business office of its registered agent,
Such change was authorized by reauthorized by the board, or the con	solution duly adopted by its board of directors or by an officer so poration has been notified in writing of the change.
Signature of an officer or director	ever Irene L. Devlin / president
I turther agree to comply with the	s registered agent and agree to act in this capacity. provisions of all statutes relative to the proper and complete in familiar with and accept the obligation of my position as registered ag filed merely to reflect a change in the registered office address, I in has been notified in writing of this change. Date
If signing on behalf of an entity: Typed or Printed Name	Sonbord

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