

P97000001407

CARLTON FIELDS  
Requestor's Name  
Post Office Drawer 190  
Address  
Nancy Hurd  
Tallahassee, FL 32302 224-1585  
City/State/Zip Phone #

300002233183--E  
-07/08/97--01069--033  
\*\*\*\*140.00 \*\*\*\*140.00  
Office Use Only 35.00

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. DREAMTIME CRUISES & TOURS, INC. P97000001407  
(Corporation Name) (Document #)
2. \_\_\_\_\_  
(Corporation Name) (Document #)
3. \_\_\_\_\_  
(Corporation Name) (Document #)
4. \_\_\_\_\_  
(Corporation Name) (Document #)

☒ Walk in ☒ Pick up time 7/8 ☒ Certified Copy  
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of State

| NEW FILINGS              |                   |
|--------------------------|-------------------|
| <input type="checkbox"/> | Profit            |
| <input type="checkbox"/> | NonProfit         |
| <input type="checkbox"/> | Limited Liability |
| <input type="checkbox"/> | Domestication     |
| <input type="checkbox"/> | Other             |

| AMENDMENTS                          |  |
|-------------------------------------|--|
| <input type="checkbox"/>            | Amendment                              |
| <input type="checkbox"/>            | Resignation of R.A., Officer/ Director |
| <input checked="" type="checkbox"/> | Change of Registered Agent             |
| <input type="checkbox"/>            | Dissolution/Withdrawal                 |
| <input type="checkbox"/>            | Merger                                 |

| OTHER FILINGS            |                  |
|--------------------------|------------------|
| <input type="checkbox"/> | Annual Report    |
| <input type="checkbox"/> | Fictitious Name  |
| <input type="checkbox"/> | Name Reservation |

| REGISTRATION/ QUALIFICATION |                     |
|-----------------------------|---------------------|
| <input type="checkbox"/>    | Foreign             |
| <input type="checkbox"/>    | Limited Partnership |
| <input type="checkbox"/>    | Reinstatement       |
| <input type="checkbox"/>    | Trademark           |
| <input type="checkbox"/>    | Other               |

FILED  
97 JUL -8 PM 3:57  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

RECEIVED  
97 JUL -8 PM 2:59

1/8  
Joy  
R.A.  
Change

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

**FILED**

97 JUL -8 PH 3:57

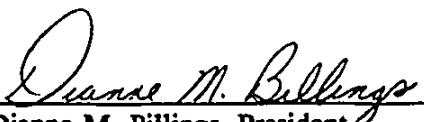
Pursuant to the provisions of Section 607.0502 or 607.1508, Florida Statutes, the undersigned corporation organized under the laws of the State of Florida, submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation is: **Dreamtime Cruises & Tours, Inc.**
- 1a. Date of incorporation: **January 1, 1997**; Document Number: **P97000001407**.
2. The name and address of the current registered agent and office:  
**Dianne M. Billings, 3312 Buffam Place, Casselberry, Florida 32707.**
3. The name and address of the new registered agent and office:

**Dianne M. Billings, 2911 Red Bug Lake Road, Suite 800, Casselberry, Florida 32707.**

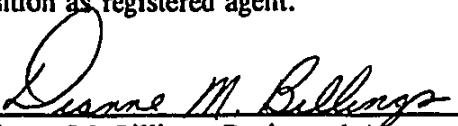
The street address of its registered agent and the street address of the business office of its registered agent as changed, will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board.

  
Dianne M. Billings, President

Date: July 3<sup>rd</sup> 1997

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, 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.

  
Dianne M. Billings, Registered Agent

Date: July 3<sup>rd</sup> 1997