

P98 000107043

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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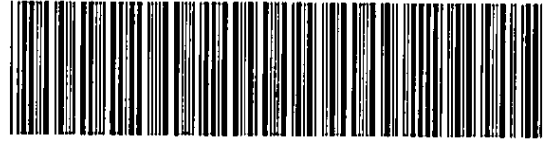
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FL

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: PARTNERS IN TRAVEL SERVICES, INC
Name of Corporation

DOCUMENT NUMBER: P98000107043

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:

TERRY T WICHLANSKI

Name of Contact Person

PARTNERS IN TRAVEL SERVICES, INC

Firm/Company

7264 AMHURST WAY

Address

CLEARWATER, FL 33764

City/State and Zip Code

TERRYTRAVEL@AOL.COM

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

For further information concerning this matter, please call:

TERRY T WICHLANSKI

Name of Contact Person

at (

727

) 5319126

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

The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

**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: PARTNERS IN TRAVEL SERVICES, INC
2. The principal office address: 7264 AMHURST WAY CLEARWATER, FL 33764-7000
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 12/23/1998 Document number: P98000107043
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)

TERRY T WICHLENSKI

7801 TIBURON DRIVE

LARGO, FL 33773

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

TERRY T WICHLENSKI

7264 AMHURST WAY

P.O. Box NOT acceptable

CLEARWATER, FL 33764

SECRETARY OF STATE
TALLAHASSEE, FL

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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.

Terry T. Wichlenski
Signature of an officer or director

TERRY T WICHLENSKI DIRECTOR

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.

Terry T. Wichlenski
Signature of Registered Agent

JUNE 9, 2021

Date

If signing on behalf of an entity:

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 (04/13)