

P9900002832

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)



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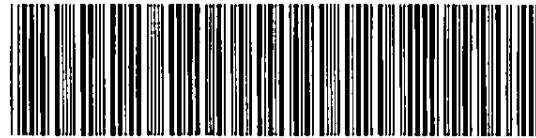
(Business Entity Name)

(Document Number)

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C. GOLDEN

SEP -7 2017

## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: Great Travel Adventures, Inc  
Name of Corporation

DOCUMENT NUMBER: P99000002832

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:

Paul Crouch  
Name of Contact Person

Great Travel Adventures, Inc  
Firm/Company

2515 Sweetwater Country Club Dr  
Address

Apopka, FL 32712  
City/State and Zip Code

gcruisebargains@aol.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Paul Crouch at (407) 774-5905  
Name of Contact Person 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: Great Travel Adventures, Inc
2. The principal office address: 2515 Sweetwater Country Club Dr
3. The mailing address (if different): Same
4. Date of incorporation/qualification: 1/8/1999 Document number: P99000002832
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)

*old address*  
Howard A. Spiegel  
1133 Louisiana Ave. Ste 214  
Winter Park, FL 32789

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

*New address*  
Howard A. Spiegel  
1801 Lee Road, Suite 265  
P.O. Box NOT acceptable  
Winter Park, FL 32789

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]  
Signature of an officer or director

Paul E. Crouch VP  
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]  
Signature of Registered Agent

8/30/2017  
Date

If signing on behalf of an entity:

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

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

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2017 SEP -5 PM 12:05  
TALLAHASSEE, FLORIDA