

**S49180**

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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## To:

Division of Corporations  
Fax Number : (850) 617-6380

## From:

Account Name : C T CORPORATION SYSTEM  
Account Number : FCA000000023  
Phone : (850) 222-1092  
Fax Number : (850) 878-5368

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: \_\_\_\_\_

**REGISTERED AGENT CHANGE  
UNIGLOBE TRAVEL (SOUTH CENTRAL) INC.**

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$35.00

**C.COULLIETTE**

SEP - 9 2011

**EXAMINER**

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

11 SEP - 8 AM 8:31

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS

## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: UNIGLOBE TRAVEL (SOUTH CENTRAL) INC.  
Name of Corporation

DOCUMENT NUMBER: S49180

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:

Deborah White

Name of Contact Person

Uniglobe USA

Firm/Company

18662 MacArthur Blvd, Suite 100

Address

Irvine, CA 92612

City/State and Zip Code

dwhite@uniglobetravel.com

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

For further information concerning this matter, please call:

Deborah White

at (

604

) 718-2600

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

CR3EDM5 (8/05)

**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: UNIGLOBE TRAVEL (SOUTH CENTRAL) INC.
2. The principal office address: 101 EAST KENNEDY BLVD #2000, TAMPA FL 33602 US
3. The mailing address (if different): 1199 W PENDER STREET SUITE 900, VANCOUVER BC V6E2R-1 CA
4. Date of incorporation/qualification: 05/01/1991 Document number: S49180
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)

TAMPA-LAWDOCK, INC.

101 EAST KENNEDY BOULEVARD, SUITE 3400

TAMPA FL 33602 US

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

C T Corporation System

c/o C T Corporation System, 1200 South Pine Island Road

P.O. Box NOT acceptable

Plantation, Florida 33324

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

TAMM DORRAN Secretary  
\_\_\_\_\_  
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.

By: Rebecca Barth  
\_\_\_\_\_  
Signature of Registered Agent

09/08/2011  
\_\_\_\_\_  
Date

If signing on behalf of an entity:

Assistant Secretary  
Rebecca Barth

\_\_\_\_\_  
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 (8/05)

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
11 SEP - 8 AM @ 31