

F170000001290

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

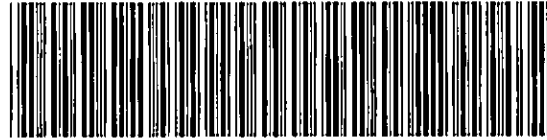
(Business Entity Name)

(Document Number)

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2022 NOV 14 AM 6:28  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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2022 NOV 14 PM 3:05  
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RECEIVED

A. BUTLER

NOV 16 2022

**Incorporating Services, Ltd.**

1540 Glenway Drive  
Tallahassee, FL 32301  
850.656.7956  
Fax: 850.656.7953  
www.incserv.com  
e-mail: accounting@incserv.com

**ORDER FORM**

**TO** Florida Department of State  
The Centre of Tallahassee  
2415 North Monroe Street, Suite 810  
Tallahassee, FL 32303  
corphelp@dos.myflorida.com  
850-245-6051

**FROM** , Melissa Moreau  
mmoreau@incserv.com  
850.656.7953

**REQUEST DATE** 11/14/2022

**PRIORITY** Routine

**OUR REF. # (Order ID#)** Jenny

**ORDER ENTITY**

**SHOE PALACE CORPORATION**

**PLEASE PERFORM THE FOLLOWING SERVICES:**

**SHOE PALACE CORPORATION**

Please file the attached change of agent.

**NOTES:**

\$35.00 Authorized

Email address for annual report reminders: arfs@incserv.com

**RETURN/FORWARDING INSTRUCTIONS:**

ACCOUNT NUMBER: I20050000052

Please bill the above referenced account for this order.

If you have any questions please contact me at 656-7956,

Sincerely,



Please bill us for your services and be sure to include our reference number on the invoice and courier package if applicable. For UCC orders, please include the thru date on the results.

**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 CALIFORNIA in order to change its registered office or registered agent, or both, in the State of Florida.

- 1. The name of the corporation: SHOE PALACE CORPORATION
- 2. The principal office address: FINISH LINE C/O SHOE PALACE, ATTN: TAX DEPARTMENT  
3308 N. MITTTHOEFFER ROAD, INDIANAPOLIS IN 46235
- 3. The mailing address (if different): \_\_\_\_\_
- 4. Date of incorporation/qualification: 10/04/2018 Document number: F17000001290
- 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)

REGISTERED AGENTS INC.  
7901 4TH ST N, STE 300  
ST. PETERSBURG, FL 33702

- 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):  
INCORPORATING SERVICES, LTD.  
1540 GLENWAY DRIVE  
TALLAHASSEE, FL 32301

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TALLAHASSEE, FLORIDA  
STATE DEPARTMENT OF REVENUE

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.

/S/ GEORGE MERSHO  
Signature of an officer or director

GEORGE MERSHO, CEO  
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.*

/S/ JENNY R. MABUS  
Signature of Registered Agent

11/9/2022  
Date

If signing on behalf of an entity:  
JENNY R. MABUS - ASSISTANT SECRETARY  
Typed or Printed Name

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