## P-69200008P



ACCOUNT NO.

072100000032

REFERENCE :

789050 4370126

AUTHORIZATION

COST LIMIT

ORDER DATE: August 7, 2000

ORDER TIME : 11:40 AM

ORDER NO. : 789050-225

CUSTOMER NO: 4370126

CUSTOMER: Louise Firestone, Esq

Lvmh Moet Hennessy Louis

19 East 57th Street

5th Floor

New York, NY 10022

CHANGE OF AGENT

NAME:

COSMETICS OF FRANCE, INC.

600003352666--0

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY PLAIN STAMPED COPY

CONTACT PERSON: Tamara Odom

TATAGE OF THE MANAGEMENT OF STATE OF STATE OF THE STATE O

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Please give original avanission date as file date.

8/10/00

FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

August 10, 2000

CSC

TALLAHASSEE, FL

SUBJECT: COSMETICS OF FRANCE, INC.

Ref. Number: F98000006924

We have received your document for COSMETICS OF FRANCE, INC.. However, the document has not been filed and is being returned for the following:

## PLEASE INCLUDE THE MAILING ADDRESS ON THE FORM.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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Doug Spitler Document Specialist

Letter Number: 100A00043299



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

Pursuant to the provisions of sec			08, Florida Statutes,
the undersigned corporation organ submits the following statement in	izea unaer ine iaws oj u order to change its re	gistered office or register	red agent, or both, in
the State of Florida.	oraci to onange as reg	5	<b>3</b>
1. The name of the corporation is:	COSMETICS OF FRANCE	, INC.	
••••••••••••••••••••••••••••••••••••••			
2. The mailing address of the corp	oration is: 12100 Br	ickell Avenue, Suit	e 1260, Miami,
Florida 33131	<u> </u>		
3. Date of incorporation/qualificat	ion: <u>12/21/1998</u>	Document numbe	r: <u>F98000006924</u>
4. The name and address of the cu			
United Corporat	e Services, Inc.		30
9200 South Dade	land Blvd., Suite 508	3	OO AUG TO PM 4: 03
Miami, FL 33156			
5. The name and address of the ne	w registered agent and	office: (P. O. Box Not Ac	ceptable)
Corporation Service Company			
1201 Hays Stree	t	·	
	orida 32301		DA DE
The street address of its registere agent, as changed, will be identical	d office and the street		office of its registered
Such change was authorized by rauthorized by the board.		by its board of directors	or by an officer so
1 Everona		8	3/2000
(Signature of an officer, chairman	or vice chairman of the board		(Date)
house Firest	d name and title)	4	
Having been named as registered corporation, I hereby accept the a I further agree to comply with the performance of my duties, and I a registered agent.	ppoiniment as registere provisions of all statute	a ageni and agree to acr is relative to the proper a	nd complete
man (malk)	) RD	8/9/2000	1
By: (Signature of Registere	d Agent)	(Date)	
If signing on behalf of an entity:			
. Carol K. Dolor		Asst. Vice Pr	
(Typed or Printed Nar	ne)	(Capaci	ty)
	* * * FILING FEE:	: \$35.00 * * *	

CR2EO45(7/97)