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EXAMINER

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ACCOUNT NO. : I2000000195

REFERENCE : 586538 7622242 AUTHORIZATION COST LIMIT ORDER DATE: November 23, 2010 ORDER TIME : 2:35 PM ORDER NO. : 586538-045 CUSTOMER NO: 7622242 CHANGE OF AGENT

NAME: ORLANDO BATHING SUIT, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Doreen Wallace

EXAMINER'S INITIALS:

STATE OF **COUNTY OF**

POWER OF ATTORNEY

NOTICE IS HEREBY GIVEN THAT Donna Spence, Controller of Orlando Bathing Suit LLC ("The Company") established under the laws of Delaware, and of the subsidiary entities shown on the list appended hereto, does hereby appoint Blanca Lozada and Elizabeth A. Dawson attorneys-in-fact for the Company and for the subsidiary entities, to act for the Company and for the subsidiary entities and in the name of the Company and of the subsidiary entities for the limited purposes authorized herein.

The Company and the subsidiary entities, having taken all necessary steps to authorize the changes and the establishment of this Power of Attorney, hereby grants its attorneys-in-fact the power to execute the documents necessary to change the Company's and the subsidiary entities' registered agent and registered office, or the agent and office of similar import, in any jurisdiction.

In the execution of any documents necessary for the purposes set forth herein, Blanca Lozada shall exercise the power of Vice President and Elizabeth A. Dawson shall exercise the power of Secretary, or, in the case of entities having managers or other positions of authority rather than officers such as Vice President or Secretary, the named individuals shall act in such office and with such authority as is required to effect the changes herein contemplated.

This Power of Attorney expires upon the earlier to occur of (a) completion and filing of the documents necessary to effect the changes in registered agent and registered office addresses contemplated herein, or (b) six (6) months after the Effective Date set forth below. The Company may revoke this Power of Attorney at any time by notice to Blanca Lozada and Elizabeth A. Dawson.

IN WITNESS WHEREOF the undersigned has executed this Power of Attorney on this 15 day of November, 2010.

Orlando Bathing Suit LLC

BY:

Donna Spence

Controller

Subscribed and sworn to before me this 17 day of November, 2010.

Mr. Jenese & Carepbell

BARBARA L CAMPBELL MY COMMISSION # DD792513 **EXPIRES May 28, 2012** First Scholary Service.com

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liabilit company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida. 1. Name of the limited liability company: Orlando Bathing Suit, LLC 2. (a) Principal office address of limited liability company: 7353 Greenbriar Parkway (Note: MUST BE STREET ADDRESS) Orlando, FL 32819 (b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) M09000001657 5/5/2009 3. Date of filing/registration in Florida 4. Document number 5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State: Registered Agent: National Corporate Research, Ltd. Inc. Registered Office Address: 515 East Park Avenue Tallahassee, FL 32301 (b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**: **NEW** Registered Agent: Corporation Service Company 1201 Hays Street **NEW** Registered Office Address: (MUST BE FLORIDA STREET ADDRESS) Tallahassee If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company (Signature of a member or authorized representative of a member) Blanca Lozada, Authorized Person (Printed or typed name of signee) 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 obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change. Comporation Service Company (Signature of Registered Agent)

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00