

850632

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TALLAHASSEE, FLORIDA

C. Ouellette JUL 25 2003



CORPORATION SERVICE COMPANY™

ACCOUNT NO. : 072100000032

REFERENCE : 152061 7124229

AUTHORIZATION :

Patricia Pajaro

COST LIMIT : \$ 35.00

ORDER DATE : June 30, 2003

ORDER TIME : 10:58 AM

ORDER NO. : 152061-045

CUSTOMER NO: 7124229

CUSTOMER: Steven Masket, Esq
Maidenform Inc.
154 Avenue E

Bayonne, NJ 07002

CHANGE OF AGENT

NAME: MAIDENFORM, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

____ CERTIFIED COPY
XX _____ PLAIN STAMPED COPY

CONTACT PERSON: Troy Todd

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

1. The name of the corporation: Maidenform, Inc.
2. The principal office address: 154 Avenue E, Bldg. 3C
Bayonne, NJ 07002
3. The mailing address (if different): _____
4. Date of incorporation/qualification: October 7, 1981 Document number: 850632
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
Allan T. Geiger
1300 Gulf Life Drive
Jacksonville, FL 32207
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Corporation Service Company
1201 Hays Street
(P.O. Box or personal mailbox NOT acceptable)
Tallahassee, FL 32301

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.

Maureen Cullen
(Signature of an officer, chairman or vice chairman of the board)

Maureen Cullen, Attorney in Fact
(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.

Corporation Service Company
Dorothy Tenshaw
(Signature of Registered Agent)

July 18, 2003

(Date)

If signing on behalf of an entity:

Dorothy Tenshaw
(Typed or Printed Name)

Assistant Vice President
(Capacity)

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE AND MAIL TO:
DIVISION OF CORPORATIONS, P.O. Box 6327, TALLAHASSEE, FL 32314

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