

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	<u> </u>
Certified Copies		
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SECRETARY OF STATE TALLAHASSEE, FLORIDA

SEP 23 2015



CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Janis M. Smith janis.smith@cscglobal.com

Date: September 15, 2015

Order#: 775056-032

Re: ZARA USA, INC.

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$35 .

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Janis M. Smith

c/o Corporation Service Company
2711 Centerville Road, Suite 400

Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA.XCOA

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

statement of cha	provisions of sections 607.0502, 6 inge is submitted for a corporatior r to change its registered office or	n organ	ized under the la	ws of the State of	NY		-
	the corporation: ZARA USA, INC.						,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	office address:enue Suite 400, New York NY 10						
3. The mailing a	ddress (if different):						
4. Date of incor	poration/qualification: 11/14/200	1	Document	number: F010000	005905		
	I street address of the current registment of State: (If resigned, enter			ed office on file w	ith the		
	C T CORPORATION SYSTEM						
	1200 SOUTH PINE ISLAND RO	AD					
	PLANTATION		FL	33324		15 :	TAL
6. The name and (if changed):	d street address of the new register	ed agei	nt (if changed) an	d /or registered of	ffice	SEP 17 PH 4: 04	AHASS
	Corporation Service Company					PH L	FOF FOF
	1201 Hays Street					+: O≀	STAT
		Box NOT	acceptable	00001		•	ΑĐΑ
	Tallahassee		FL	32301	-		
The street address changed will	ess of its registered office and the be identical.	street	address of the bu	isiness office of it	ts regist	ered age	ent,
	as authorized by resolution duly a ne beard, or the corporation has b						
10			Dona Priebe, V	/ice President			
Signah	ire c: an officer or director	-	Print	ed or typed name and tit	tie		_
performance of agent. Or, if the hereby confirm	the appointment as registered ag to comply with the provisions of a my duties, and I am familiar with is document is being filed merely that the corporation has been no on Service Company	n and a to refl	eccept the obligat ect a change in t	tion of my position he registered offic	n as reg	istered 2ss, I	
By: X	are 2-Kubi	_e	09/14/2015				_
`	nature of Registered Agent			Date			
	half of an entity:						
**	, Asst. Vice President yped or Printed Name	•					
1	, pre s. xxxxxx xxxxx						

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

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