F0200005891

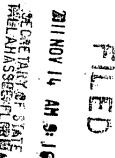
(Re	questor's Name)	
(Add	dress)	
(Add	dress)	
(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to I	Filing Officer:	

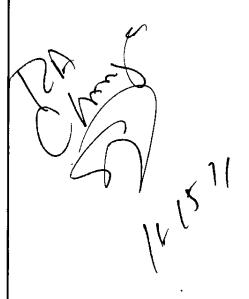
Office Use Only



600214241596

11/14/11--01026--017 **105.00





COVER LETTER

TO: A D	mendment Section ivision of Corporations			
SUBJEC'	Г:	Oceania Cruis	es, Inc.	
		rame or cor	porumon	
DOCUM	ENT NUMBER:	F0200	00005891	
The enclo	sed Statement of Change	of Registered Office/	Agent and fee are subn	nitted for filing.
Please ret	urn all correspondence co	ncerning this matter t	o the following:	
	,	Lynn W Name of Cont	/hite	
		Name of Cont	act Person	
		Oceania Cru		
		Firm/Con	npany	
		9300 NIV/ 33 Str	not Suito 208	
		8300 NW 33 Stre		
		114410		
		Miami Florid	ta 33122	
		Miami, Florid City/State and	Zip Code	
	lese	hita @i		
	F-mail address	hite@prestigecruis	senoidings.com ture annual report not	ification)
	D man address	s. (10 0 0 useu 101 1ut	are annual report no.	
Can Autha	u information concerning	this matter place on	11.	
ror turthe	r information concerning	this matter, please ca	n;	
	Jason Montag		at (305)	514-2743 time Telephone Number
	Name of Contact Pe	erson	Area Code & Day	time Telephone Number
Enclosed i	is a \$35.00 check made pa	ayable to the Departm	ent of State.	
	Mailing A	ddress:	Street Addres	<u>s:</u>
	Amendme	nt Section	Amendment S	Section
	Division o P.O. Box	of Corporations	Division of C	-
		6327 ee, FL 32314	Clifton Build	ve Center Circle
	i ananasso	JO, I II JZJ 14	Tallahassee,	

TO:

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.15 nge is submitted for a corporation organized unde r to change its registered office or registered agen	er the laws of the State of	0/
	he corporation: Oceania Cruises, Inc. office address: 8300 NW 33 Street, Suite 3	08, Miami, Florida 3	3122
3. The mailing a	ddress (if different):		
4. Date of incorp	oration/qualification: 11/25/2002 Do	cument number:	F02000005891
	street address of the current registered agent and tment of State: (If resigned, enter resigned)	registered office on file w	rith the
	Gema M. Pinon		_
	8300 NW 33 Street, Suite 308		
	Miami, Florida 33122		
6. The name and (if changed):	street address of the new registered agent (if char		
	Lynn White		
	P.O. Box NOT acceptable		
The street addre	ss of its registered office and the street address of the identical.	of the business office of	— its registered agent,
Such change wa authorized by th	s authorized by resolution duly adopted by its be board, or the corporation has been notified in	oard of directors or by a writing of the change.	n officer so
Signatur	of all officer or director	Jason Montague	
I hereby accept I further agree t of my dutes, an document is bei corporation has	the appointment as registered agent and agree to comply with the provisions of all statutes related I am familiar with and accept the obligation on the filed merely to reflect a change in the registed been notified in writing of this change.	to act in this canacity	
If signing on be	nalf of an entity:	· Date	
11	ped or Printed Name		

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