## F07000005764

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PICK-UP WAIT MAIL
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CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195						
REFERENCE : 543504 8453053						
AUTHORIZATION: Spiciole Man						
COST LIMIT : \$ 35.00						
ODDED DATE Tule 0 2024						
ORDER DATE : July 9, 2024						
ORDER TIME : 2:17 PM						
ORDER NO. : 543504-039						
CUSTOMER NO: 8453053						
CHANGE OF AGENT						
NAME: BATH & BODY WORKS DIRECT, INC.						
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:						
CERTIFIED CODY						
CERTIFIED COPY XX PLAIN STAMPED COPY						
CONTACT PERSON: Shauna Godbolt						
EXAMINER'S INITIALS:						

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

statement of cha	provisions of sections 607.0302, 617.0302 ange is submitted for a corporation organ ar to change its registered office or registe	ized under the lav	vs of the State of	Delaware		
1. The name of t	the corporation: BATH & BODY WORKS office address: 3 Limited Parkway, Colum	DIRECT, INC.	0		<del></del>	
4. Date of incorp	poration/qualification: 11/21/2007	Document i	number: _ <del></del>	005764		
	d street address of the current registered agetment of State: (If resigned, enter resigned		d office on file w	ith the		
	C T Corporation System	_		_		
	1200 South Pine Island Road			2024 JUL		
	Plantation	FL	33324		****	
6. The name and street address of the new registered agent (if changed) and /or registered of (if changed): Corporation Service Company					1 [ 1] 1 [ 1] 1 [ 1] 1 [ 1]	
	1201 Hays Street			α	) <b>)</b>	
P.O. Box NOT acceptable						
	Tallahassee	FL.	32301	_		
as changed will					igent,	
Such change wa authorized by th	as authorized by resolution duly adopted ne board, or the corporation has been not	by its board of d ified in writing o	lirectors or by an of the change.	ı officer so		
/s/ Tobin N	4. Nelson	Tobin M. Nelson, Asst. Secretary				
	re of an officer or director		ed or typed name and t		<del></del>	
corporation has	the appointment as registered agent and to comply with the provisions of all statud I am familiar with and accept the obling filed merely to reflect a change in the seen notified in writing of this change.	d agree to act in the steel attive to the gation of my positive registered office	this capacity. e proper and cor ition as registere e address, I here.	nplete performed agent. Or, by confirm th	nance if this at the	
Corporation By: ( )	n Service Company	07/18/2024				
	Signature of Registered Agent Date					
If signing on be	half of an entity:					
	, Asst. Vice President					
T	yped or Printed Name	E. 035 00 4 4 4				
	* * * FILING FE	E: 333.00 " " "				