## F10000002857

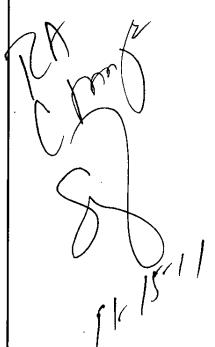
(Requestor's Name)						
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PICK-UP WAIT M	AIL					
(Business Entity Name)						
(Document Number)						
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Special Instructions to Filing Officer:						
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## **COVER LETTER**

TO:		nt Section f Corporations						
SUBJE	ECT:	Presti	ge Cruises I Name of C	Holdin orporati	igs, Inc	). 		
DOCU	MENT NU	MBER:	F10	00000	2857			
The en	closed State	ment of Change of I	Registered Offic	e/Agent	and fee a	re submit	ted for filing.	
Please	return all co	rrespondence conce	rning this matter	r to the f	following	:		
			Lynn '	White				
			Name of Co	ntact Pe	rson			
Prestige Cruise Holdings, Inc.								
			Firm/Co	ompany				
	8300 NW 33 Street, Suite 308							
			Add	ress				
	Miami, Florida 33122 City/State and Zip Code							
lwhite@prestigecruiseholdings.com  E-mail address: (to be used for future annual report notification)							Seed to V	
		E-mail address: (1	to be used for f	uture ar	inuai rep	ort notifi	cation)	
For fur	ther informa	ation concerning this	s matter, please o	call:				
		Jason Montague		at (	305	)	514-2743 ne Telephone Number	
	Nar	ne of Contact Person	n ·	Ā	rea Code	& Daytin	ne Telephone Number	
Enclose	ed is a \$35.0	0 check made paya	ble to the Depart	ment of	State.			
		Mailing Addr Amendment S Division of C P.O. Box 632 Tallahassee,	Section Corporations 27		Ameno Divisi Cliftor 2661 I	n Buildin	rporations g c Center Circle	

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florid inge is submitted for a corporation organized under the laws of the State o ir to change its registered office or registered agent, or both, in the State o	10/C
	the corporation: Prestige Cruises Holdings, Inc. office address: 8300 NW 33 Street, Suite 308, Miami, Florida	33122
3. The mailing a	address (if different):	
4. Date of incorp	poration/qualification: 06/23/2010 Document number:	F10000002857
	d street address of the current registered agent and registered office on file tment of State: (If resigned, enter resigned)	with the
	Gema M. Pinon	
	8300 NW 33 Street, Suite 308	_
	Miami, Florida 33122	<u>Z4</u> B
6. The name and (if changed):	office AHASS	
	Lynn White	
	P.O. Box NOT acceptable	
The street address changed will	ess of its registered office and the street address of the business office of be identical.	f its registered agent,
	as authorized by resolution duly adopted by its board of directors or by ne board, or the corporation has been notified in writing of the change.	
Bignatu	Jason Montagu Printed or typed name an	
I hereby accept	the appointment as registered agent and agree to act in this capacity, to comply with the provisions of all statutes relative to the proper and c d I am familiar with and accept the obligation of my position as registeng filed merely to reflect a change in the registered office address, I had been notified in writing of this change.	complete performance
	nature of Registered Agent Date	2011
V	half of an entity:	
	yped or Printed Name	

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