F13000004707

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
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DIVISION OF CARPONATION

JUL 23 2014

COVER LETTER

TO:

Amendment Section Division of Corporations

SUBJECT: SUNGLASS WAREHOUSE, INC.

Name of Corporation

DOCUMENT NUMBER: F13000004707

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Jerry Howell

Name of Contact Person

Corporate Filing Solutions Inc.

Firm/Company

906 W. 2nd Ave. Ste 100

Address

Spokane, WA 99201

City/State and Zip Code

research@llcagent.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jerry Howell

_{at (}857)49

453-3698

Name of Contact Person

Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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 MA		
in order to change its registered office or registered agent, or both, in the State of Florida.		
I. The name of the corporation: SUNGLASS WAREHOUSE, INC.		
2. The principal office address: 5155 SHILOH ROAD, SUITE 200 CUMMING, GA 30040		
3. The mailing address (if different):		
4. Date of incorporation/qualification: 10/29/2013 Document number: F13000004707		
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)		
CORPORATE FILING SOLUTIONS, LLC		
155 OFFICE PLAZA DRIVE SUITE A		
TALLAHASSEE, FL 32301		
155 OFFICE PLAZA DRIVE SUITE A TALLAHASSEE, FL 32301 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): CORPORATE FILING SOLUTIONS		
CORPORATE FILING SOLUTIONS		
3030 N. ROCKY POINT DR. STE 150A		
P.O. Box NOT acceptable TAMPA, FL 33607		
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.		
Signature of an officer or director 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.		
6/18/2014		
Signature of Registered Agent Date		
If signing on behalf of an entity:		
Dan KeenManager Typed or Printed Name		

Make Checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 CR2E045 (03/12)

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