F95000003315

| (Re | questor's Name) | |
|---------------------------|-------------------|------|
| (Ad | dress) | |
| (Add | dress) | |
| (Cit | y/State/Zip/Phone | e #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bu: | siness Entity Nar | ne) |
| (Do | cument Number) | |
| Certified Copies | | |
| Special Instructions to I | Filing Officer: | |
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R.A. Charge

6. Couttotte JUN 1 7 2008



| ON SERVICE COMPANY. | | | | |
|--|--|--|--|--|
| ACCOUNT NO. : 072100000032 | | | | |
| REFERENCE : 608418 4709372 | | | | |
| AUTHORIZATION: Spelle Reman | | | | |
| COST LIMIT : \$35.00 | | | | |
| ORDER DATE : June 12, 2008 | | | | |
| ORDER TIME : 9:37 AM | | | | |
| ORDER NO. : 608418-255 | | | | |
| CUSTOMER NO: 4709372 | | | | |
| | | | | |
| CHANGE OF AGENT | | | | |
| | | | | |
| YAME I TOTA DANTA THE | | | | |
| NAME: LEE JOFA DANIA, INC. | | | | |
| | | | | |
| DI ENCE DEMININ MUE HOLLOWING NO DROOP OF HILING | | | | |
| PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: | | | | |
| XX PLAIN STAMPED COPY | | | | |
| COMPACT, DEPOSIT TO A 1 TO A 1 | | | | |
| CONTACT PERSON: Amanda Roath | | | | |
| EXAMINER'S INITIALS: | | | | |

STATEMENT \mathfrak{F} CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

| statement of cha | provisions of sections 607.0502, 617.0502, 607.150 ange is submitted for a corporation organized under fer to change its registered office or registered agent | r the laws of the State of Delaware | |
|--|--|---|---------------------|
| | | t, or both, in the state of Prortaa. | |
| I. The name of | the corporation: LEE JOFA DANIA, INC. | - NV 11714 | |
| 2. The principal | l office address: 225 Central Avenue South, Bethpage | e, NY 11714 | |
| 3. The mailing a | address (if different): | | |
| 4. Date of incorp | rporation/qualification: July 11, 1995 Doc | cument number: F95000003315 | |
| | nd street address of the current registered agent and rurrment of State: | registered office on file with the | |
| | Blumbergexcelsior Corporate Services, Inc. | | |
| | 4435 Old Winter Garden Road | | |
| | Orlando, FL 32811 | | |
| 6. The name and (if changed): | d street address of the new registered agent (if change | ged) and /or registered office LAHASS | |
| | Corporation Service Company | TAR HASS | CALES-WAY |
| | 1201 Hays Street | مر ي | • |
| | (P.O. Box NOT acceptable) | OF ST | G200 |
| | Tallahassee, FL 32301 | ORI 081 | - > |
| The street address changed will | ress of its registered office and the street address o ll be identical. | of the business office of its registered age | ent, |
| Such change wanthorized by the | vas authorized by resolution duly adopted by its be the board, or the corporation has been notified in v | oard of directors or by an officer so writing of the change. | |
| Mein | ruen Cullen Mauree | en Cullen, Attorney In Fact (Printed or typed name and title) | |
| I further agree of my duties, ar document is be corporation has | t the appointment as registered agent and agree to to comply with the provisions of all statutes relate nd I am familiar with and accept the obligation of sing filed merely to reflect a change in the register is been notified in writing of this change. | o act in this capacity | ince this the |
| By//lefh | n Service Company Luk Vanno ignature of Registered Agent) | (Date) | _ |
| • | chalf of an entity: | (Dute) | |
| | nnoy, Asst. Vice President | | |
| | (Typed or Printed Name) | | |
| | * * * FILING FEE: \$35.0 | 0 * * * | |

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (8/05)