

M02000001556

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

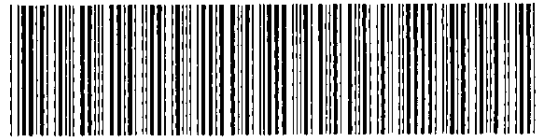
(Business Entity Name)

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DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

B. KOHR  
NOV 24 2010  
EXAMINER

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
10 NOV 24 PM 12:45



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195

REFERENCE : 587536 5059642

AUTHORIZATION : *[Signature]*

COST LIMIT : \$ 25.00

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
10 NOV 24 PM 12:45

ORDER DATE : November 24, 2010

ORDER TIME : 9:30 AM

ORDER NO. : 587536-010

CUSTOMER NO: 5059642

CHANGE OF AGENT

NAME: TOMMY HILFIGER RETAIL, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

\_\_\_\_\_ CERTIFIED COPY  
XX \_\_\_\_\_ PLAIN STAMPED COPY

CONTACT PERSON: Carina L. Dunlap

EXAMINER'S INITIALS: \_\_\_\_\_

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY**

*Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.*

DIVISION OF CORPORATIONS  
 FILED  
 NOV 20 2007  
 PH 12-45

1. Name of the limited liability company: TOMMY HILFIGER RETAIL, LLC
2. (a) Principal office address of limited liability company: 200 Liberty Way  
 (Note: **MUST BE STREET ADDRESS**) Cranbury, NJ 08512
- (b) Mailing address of limited liability company: 200 Liberty Way  
 (Note: **MAY BE POST OFFICE BOX**) Cranbury, NJ 08512

- 06/17/2007 3. Date of filing/registration in Florida
- M02000001556 4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
- Registered Agent: NRAI Service Inc.
- Registered Office Address: 2731 Executive Park Drive, Suite 4  
Weston, FL 33331

- (b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:
- NEW Registered Agent:** Corporation Service Company
- NEW Registered Office Address:** 1201 Hays Street  
 (MUST BE FLORIDA STREET ADDRESS) Tallahassee, FL 32301

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

*[Signature]*  
 (Signature of a member or authorized representative of a member)

MARU J. FISCHER  
 (Printed or typed name of signee)

*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 obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.*

By: *[Signature]*  
 (Signature of Registered Agent) Sylvia Queppet, Asst. Vice President

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314  
 FILING FEE: \$25.00