## POIDS PAR LETTER 631

TO: Amendment Section Division of Corporations

CR2E045(07/02)

SUBJECT: NAUTICA DEL NORTE, INC.	
(Name of corporation)	
DOCUMENT NUMBER: P01000096031	<u> </u>
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	9 
RICHARD BERRY (Name of person)	·
(Name of person)	80000079800183
(Name of firm/company)	-09/24/0201035004 -*****35.00 *****35.00
3500 CLEVELAND STREET (Address)	<u></u>
HOLLYWOOD, FLORIDA 33021 (City/state and zip code)	· · · · · · · · · · · · · · · · · · ·
For further information concerning this matter, please call:	02 (
(Name of person) at () (Area code & daytime to	elephone number)
,	
Enclosed is a \$35.00 check made payable to the Department of State.	AM IO: 35 OF STATE
Mailing Address:  Amendment Section Division of Corporations P.O. Box 6327  Street Address: Amendment Section Division of Corporations 409 E. Gaines Street	
Tallahassee, FL 32314 Tallahassee, FL 32399	
	0°0'V

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

	ne provisions of sections 607.05 of change is submitted for a corp			
FLORIDA	in order to change its r			
of Florida.				my or com, in the State
1. The name of	f the corporation: NAUTICA	DEL NORTE,	INC.	
2. The principa	al office address: 3500 CLE	VELAND STRE	ET, HOLLYWOOD,	FL 33021
3. The mailing	address (if different):			±
				<u> </u>
4. Date of incom	rporation/qualification: 10/0	2/01 =	_Document number	er: P01000096031
5. The name an Florida Depa	nd street address of the current reartment of State:	egistered agent	and registered offic	ce on file with the
	CORPORATION SERVI	CE COMPANY	-	02 ( SEC)
	1201 HAYS STREET			
	TALLAHASSEE, FLOR	IDA 32301		
6. The name and changed):	nd street address of the new re	gistered agent	(if changed) and /	
,	3500 CLEVELAND STR	ਹਵਾਸ਼ਾਹ ਹਵਾਸ਼ਾਹ	·	
•		nal mailbox NOT acc	eptable)	
	HOLLYWOOD, FLORIDA	A 33021		
The street addressent, as change	ess of its registered office and the ed will be identical.	ne street addres	ss of the business of	office of its registered
Such change was authorized by the	as authorized by resolution duly ne board, or the corporation has	adopted by its been notified	board of directors in writing of the ch	s or by an officer so lange.
I hereby accept	chairman or vice chairman of the board)  the appointment as registered at the comply with the provisions of	gent and agre	Printed or typed name and the to act in this cap	acity
performance of registered agen	to comply with the provisions of my duties, and I am familiar wi t. Or, if this document is being hereby confirm that the corpor	ith and accept filed merely to	the obligation of marge i	r ana complete ly position as n the registered
) ZICIN (Si	ignature of Registered Agent)	<u>=18/</u>	09/02 (Date)	
If signing on behalf	fof an entity:		•	
(T)	yped or Printed Name)	- w <u>- w</u>	(Capacity)	<u> </u>

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