P05000040057

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Ru	siness Entity Nar	ma)
ua)	Silless Entity Mai	ne)
(5-		
(D0	cument Number)	
		,
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



300303638543



RECEIVED
RECEIVED

Incorporating Services, Ltd.

1540 Glenway Drive Tallahassee, FL 32301 850.656.7956

Fax: 850.656.7953 www.Incserv.com

e-mail: info@incserv.com



ORDER FORM

Florida Department of State
Division of Corporations, Clifton
Building
2661 Executive Center Circle
Tallahassee, FL 32301
corphelp@dos.myflorida.com
850-245-6051

FROM

Melissa Stops mstops@incserv.com 850.656.7953 DEC -4 PM 4: 29

REQUEST DATE 12/4/2017

PRIORITY Routine

OUR REF # (Order ID#) 614378

ORDER ENTITY

PRINCESS COLLECTION CORP.

PRINCESS COLLECTION CORP. (FL)

File the attached change of agent document

NOTES:

\$35.00 Authorized

RETURN/FORWARDING INSTRUCTIONS:

ACCOUNT NUMBER: I20050000052

Please bill the above referenced account for this order.

If you have any questions please contact me at 656-7956,

Sincerely,

Please bill us for your services and be sure to include our reference number on the invoice and courier package if applicable. For UCC orders, please include the thru date on the results.

Monday, December 04, 2017

Page 1 of 1

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

statement of a	he provisions of sections change is submitted for a	corporation org	anized under the la	iws of the State of	TLORID	A
	rder to change its registence of the corporation:	rea office or regi VNCESS	sierea ageni, or oc Collinations	Coff.		,
	pal office address:	HI WEST	36 TH 57	17147	402	
3. The mailing	g address (if different):_	100 1000				
4. Date of inco	orporation/qualification:	3/08/200	5 Document	number: PO:	5000040	057
	nd street address of the coartment of State: (If resi			ed office on file w	ith the	
		RESIC	SNED	·		
						330 (
•	-				•	-
6. The name at (if changed)	nd street address of the r	ew registered ag	: ent (if changed) an	d /or registered of	fice	PH h:
	Incorporation	ling Services	Ltd.			23
	.1540 Gler	Drive P.O. Box NO	ST			
•	Talla hassee		3230			
The street add	ress of its registered off	ice and the stree	t address of the bu	siness office of it	s registered age	nt,
•	vas authorized by resolu the board, or the corpor	tion duly adopte ation has been no	d by its board of do	lirectors or by an of the change.	officer so	
Mule	ture of an officer or director		JANES	GOLDSTE		_
• /		gistered agent a visions of all sta		d or typed name and till this capacity. se proper and com		
performance of agent. Or, if the hereby confirm	of the appointment as re to comply with the pro- f my duties, and I am fa his document is being fi n that the corporation h	miliar with and led merely to ref as been notified	accept the obligat lect a change in th in writing of this c	ion of my position he registered offic change.	as registered e address, I	
Allm	gnalure of degistred Agent	•	12/4/	17		- .
If signing on bo	chalf of an entity:		, ,			
Melis	Sa Typed or Printed Name					
	· · · · · · · · · · · · · · · · · · ·		,			

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