## DO500062761

(Re	questor's Name)			
(Ad	dress)			
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(Cit	y/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Bu	siness Entity Nar	ne)		
(Document Number)				
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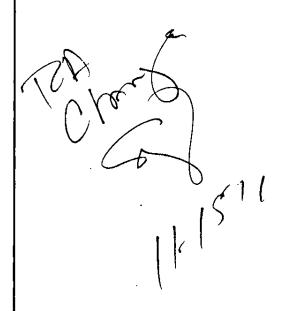
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## **COVER LETTER**

TO:	Amendment So Division of Co	ection orporations	
SUBJ	ECT:	Prestige Cruises A	Air Services, Inc. Corporation
DOCU	JMENT NUMB	BER:P0	5000062761
The er	closed Statemen	nt of Change of Registered Of	ice/Agent and fee are submitted for filing.
Please	return all corres	pondence concerning this mat	ter to the following:
		Lyn Name of O	n White Contact Person
			s Air Services, Inc.
		riiii/	Company
			Street, Suite 308
		A	ddress
		Miami, F City/State	orida 33122 and Zip Code
	E-1	lwhite@prestiged	ruiseholdings.com future annual report notification)
For fu	ther information	n concerning this matter, pleas	e call:
		on Montague	at ( 305 ) 514-2743
	Name o	of Contact Person	at ( 305 ) 514-2743 Area Code & Daytime Telephone Number
Enclos	ed is a \$35.00 cl	heck made payable to the Dep	artment 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

statement of cha	provisions of sections 607.0302, 617.0302, 607.1308, or 617.1308, Florida inge is submitted for a corporation organized under the laws of the State of r to change its registered office or registered agent, or both, in the State of	Florida	<u> </u>	
	the corporation: Prestige Cruises Air Services, Inc. office address: 8300 NW 33 Street, Suite 308, Miami, Florida 3	 3122		<del></del>
	ddress (if different):			
	duress (if different).			
4. Date of incorp	poration/qualification: 04/28/2005 Document number:	P0500006	2761	
	I street address of the current registered agent and registered office on file wrtment of State: (If resigned, enter resigned)	vith the		
	Gema M. Pinon			
	8300 NW 33 Street, Suite 308			
	Miami, Florida 33122		JI VON IIE	
6. The name and (if changed):	street address of the new registered agent (if changed) and /or registered office			CETTANE.
	Lynn White		A	M
		_ 95 _ 95	•	
	P.O. Box NOT acceptable	33- 33-	en e	
The street addre	ess of its registered office and the street address of the business office of be identical.	its registere	d agent	ī,
Such change wa authorized by th	as authorized by resolution duly adopted by its board of directors or by a ne board, or the corporation has been notified in writing of the change.	n officer so		
Stonette	Jason Montague of an officer or director Printed or typed name and			•
	the appointment as registered agent and agree to act in this capacity, to comply with the provisions of all statutes relative to the proper and co del am familiar with and accept the obligation of my position as register ng filed merely to reflect a change in the registered office address, I here to been notified in writing of this change.	omplete perf ed agent. C eby confirm	ormanc or, if th that th	re is e
94	mbrate 10/24/3	2011		
U	half of an entity:			
Ту	yped or Printed Name			

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