## D0200063761

(Re	questor's Name)				
/^	dress)				
(/\u	uless)				
(Ad	dress)				
(Cit	ty/State/Zip/Phone	#)			
PICK-UP	☐ WAIT	MAIL			
(Ви	isiness Entity Nam	e)			
(Document Number)					
Certified Copies	_ Certificates	of Status			
Special Instructions to	Filing Officer:				
		:			
		:			
	Office Use Onl	v			



100271316881

.09/04/15--01017--023 \*\*35.00

15 SEP -4 PK 3: 30

Ra crange

SEP 1 1 2015

## COVER LETTER

**TO:** Amendment Section Division of Corporations

SUBJECT: Prestige Cruises Air Services, Inc.

Name of Corporation

DOCUMENT NUMBER

P05000062761

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:

Daniel S. Farkas

Name of Contact Person

Prestige Cruises Air Services, Inc.

Firm/Company

7665 Corporate Center Drive

Address

Miami, FL 33126

City/State and Zip Code

dfarkas@ncl.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Daniel S. Farkas

,305

436.4690

Name of Contact Person

Area Code & Daytime Telephone Numbero

Enclosed is a \$35.00 check made payable to the Department 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 607.0502, 617 inge is submitted for a corporation o r to change its registered office or re	organized un	der the laws of	the State of <u>F</u>	lorida	s	
1. The name of	the corporation: Prestige Cruise	es Air Se	rvices, Inc.				
2. The principal	office address: 7665 Corporate	e Center	Drive, Mian	ni, FL 331	26		
3. The mailing a	address (if different):						
4. Date of incorp	poration/qualification: 04/28/200	D5	Ocument numb	er: P05000	006276	1	
	I street address of the current register tment of State: (If resigned, enter res	•	d registered off	ice on file wit	th the		
	Jill Guidicy						
	7665 Corporate Center Di	rive					
	Miami, FL 33126						
6. The name and (if changed):	d street address of the new registered	l agent (if ch	anged) and /or	registered off	ice		
	Daniel S. Farkas						
	7665 Corporate Center Di	rive					
	P.O. Box Miami, FL 33126	x NOT acceptab	e			•	
The street addre	ess of its registered office and the st be identical.	treet address	of the busines	s office of its	registered	了 legent	والإستوا
Such change was authorized by the	as authorized by resolution duly ado ne board, on the corporation has been	opted by its en notified in	board of directon writing of the	ors or by an o	fficer so	1	-
11/1	My by Wh		ndy Beck, D	irector	Card Some	-0 -11	
I hereby accept I further agree performance of agent. Or, if the	the appointment as registered agen to comply with the provisions of all my duties, and I am familiar with a is document is being filed merely to that the corporation has been notifi	nt and agree I statutes rel and accept O reflect a ch lied in writin	to act in this c ative to the pro he obligation of ange in the reg	ped name and title apacity. per and comp my position gistered office e.		က္ မ red I	
DUX	gre		127/15				
	hature of Registered Agent  half of an entity:		• •	Date			
т	yped or Printed Name						