P06000026276

(Re	questor's Name)	<u>-</u> '
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filina Officer:	
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COVER LETTER

TO: Amendme Division of	ent Section of Corporations	
SUBJECT: Atla	antis Resortwear, Inc. (Name of Corp	poration)
DOCUMENT NI	UMBER: P06000026276	
The enclosed Stat	ement of Change of Registered Office/A	Agent and fee are submitted for filing.
Please return all c	orrespondence concerning this matter to	the following:
	Bruce H. Hornstein (Name of Conta	ct Person)
	(Firm/Com	pany)
<u>:</u>	317-71 Street (Addres	s)
!	Miami Beach, Fl 33141 (City/State and)	Zip Code)
For further inform	nation concerning this matter, please call	l:
Bruce H. Horns	stein ame of Contact Person)	at (305) 865-4311 (Area Code & Daytime Telephone Number)
Enclosed is a \$35.	00 check made payable to the Departme	ent 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

1 The nam	ne of the corporation: Atlantis Resortwear, Inc.
	cipal office address: 32 St. George Street, St. Augustine, Fl 32084
3. The mai	ling address (if different):
4. Date of i	incorporation/qualification: 02/22/2006 Document number: P06000026276
	ne and street address of the current registered agent and registered office on file with the Department of State:
	Danny Schechter
	31 King Street
	St. Augustine, FI 32084
6. The nam (if chang	ne and street address of the new registered agent (if changed) and /or registered office
	Bruce H. Hornstein
	317-71 Street SR WOT acceptable)
	Miami Beach, Fl 33141
The street as changed	address of its registered office and the street address of the business office of its registered age
Such changauthorized	ge was authorized by resolution duly adopted by its board of directors or by an officer so by the board, or the corporation has been notified in writing of the change.
	Signature of apprincer or director) DANN Y Scheckter (Printed or types name and title)
	ccept the appointment as registered agent and agree to act in this capacity. gree to comply with the provisions of all statutes relative to the proper and complete performa es, and I am familiar with and accept the obligation of my position as registered agent. Or, if a is being filed merely to reflect a change in the registered office address, I hereby confirm that a m has been notified in writing of this change.
	3/31/06
	(Signature of Registered Agent) (Date)

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (8/05)