P06000096549

(Requestor's Name)
(Address)
(Address)
*
(City/State/Zip/Phone #)
•
PICK-UP WAIT MAIL
•
(Business Entity Name)
, , ,
(Document Number)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
•

Office Use Only



600154179386

04/30/09--01012--008 **35.00

Rich

09 APR 30 PM 1: 32

SECRETARY OF STATE DIVISION OF CORPORATIONS



COVER LETTER

Amendment Section Division of Corporations

TO:

SUBJECT: Tallulah Lingerie Corporation (Name of Corporation)
DOCUMENT NUMBER: p06000096549
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:
Jonathan Z. Kantor (Name of Contact Person)
Law Office of Jonathan Z. Kantor, P.A. (Firm/Company)
318 Indian Trace #117 (Address)
Weston, FL 33326 (City/State and Zip Code)
For further information concerning this matter, please call:
Jonathan Z. Kantor at (786) 200- 0710
Jonathan Z. Kantor at (786) 200-0710 (Name of Contact Person) (Area Code & Daytime Telephone Number)
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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Tallulah Lingerie Company
2. The principal office address: 2230 Weston RD, Weston,FL 33326
3. The mailing address (if different): Same
4. Date of incorporation/qualification: 7/21/2006 Document number: p06000096549
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)
Jonathan Z. Kantor
640 South Miami Avenue
Miami, FL 33130
640 South Miami Avenue Miami, FL 33130 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): Jonathan Z. Kantor
Jonathan Z. Kantor
318 Indian Trace #117
(P.O. Box NOT acceptable)
Weston, FL 33326
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.
(Signature of an officer or director) (Printed or typed name and title)
I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.
(Signature of Registered Agent) (Date)
If signing on behalf of an entity:

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