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CHASSEF, FLORID

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COVER LETTER

TO:	Amendment Section Division of Corporations				
SUBJI	ECT: PURE DIAMOND APPAREL, INC	<u> </u>			
	(Name of C	•			
DOCU	MENT NUMBER: © \$\int 00 7000 \partial 13	3968			
The en	closed Statement of Change of Registered Office	e/Agent and fee are submitted for filing.			
Please return all correspondence concerning this matter to the following:					
	•				
	BRIAN W. ASHTON				
	(Name of Con	ntact Person)			
	PURE DIAMOND APPAREL, I	NC			
	(Firm/Co				
	3700 NW 124TH AVE SUITE 13	35			
	(Add	ress)			
CORAL SPRINGS, FLORIDA 33065					
	(City/State ar	nd Zip Code)			
For fur	ther information concerning this matter, please of	eall:			
BRIAN	N W. ASHTON	at (754) 264-5392 (Area Code & Daytime Telephone Number)			
	(Name of Contact Person)	(Area Code & Daytime Telephone Number)			
Enclos	ed is a \$35.00 check made payable to the Depart	ment of State.			
	Mailing Address: Amendment Section	Street Address: Amendment Section			
	Amendment Section Division of Corporations	Amendment Section Division of Corporations			
	P.O. Box 6327	Clifton Building			
	Tallahassee, FL 32314	2661 Executive Center Circle			
		Tallahassee, FL 32301			

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

Ξ,

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Singe is submitted for a corporation organized under the laws of the State of $_$ or to change its registered office or registered agent, or both, in the State of F	FLORIDA	_
1. The name of	the corporation: Pure Diamond Appenel	ILIC.	
2. The principal	office address: 3760 LLW- 12th Me	Quite 1	135
	CURNI SORINK FIG 3	3045	
3. The mailing a	ddress (if different):		·· -
4. Date of incorp	poration/qualification: 1/30/2007 Document number: P070000)13968	
	I street address of the current registered agent and registered office on file with the transfer of State:	th the	
	LYNNE GOLDER, PRESIDENT	07 <i>t</i> SEC ALL	Analysis (
	3700 NW 124th Ave Suite 135	PR 2	enzanta.
	CORAL SPRINGS, FLORIDA 33065	7 AM RY OF SEELF	a 2 2 2
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered off		Androne A
	LYNNE GOLDER, PRESIDENT	⊅ -	
	125 S STATE ROAD 7 SUITE 104-314	_	
	(P.O. Box NOT acceptable)		
	ROYAL PALM BEACH, FLORIDA 33411	_	
The street address changed will	ess of its registered office and the street address of the business office of it be identical.	s registered ag	gent,
Such change wa authorized by th	as authorized by resolution duly adopted by its board of directors or by an board, or the corporation has been notified in writing of the change.	officer so	
Bru U	BRIAN W- ASITION (Printed or typed name and to	FO title)	
	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 com d I am familiar with and accept the obligation of my position as registered in g filed merely to reflect a change in the registered office address, I here to be a notified in writing of this change.		nance f this t the
(Sig	gnature of Registered Agent) (Date)		
If signing on be	half of an entity:		
LYNNE	GOLDER		
(1	Typed or Printed Name)		

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