P12000001521

(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

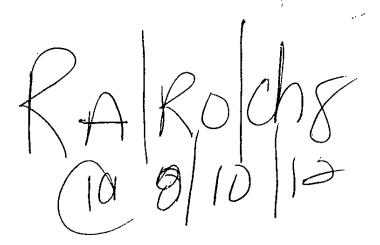
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SECRETARION SECTION OF THE 1:33



COVER LETTER

Division of Corporations		
SUBJECT: WOMENS SHOES ONLY Name of Corporation P 12 0000 1521		
Name of Corporation		
DOCUMENT NUMBER: P / 2 00000 1521		
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:		
Ed Koziol Name of Contact Person		
Name of Contact Person		
WOMENS SHOES ONLY Firm/Company		
8956 Tuscan Valley Place		
Orlando Fl 32825		
Orlando F1 32825 City/State and Zip Code edkoriol a hotmail. com E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
Ed Kozio at 407 2821763 Name of Contact Person Area Code & Daytime Telephone Number		
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 Street Address: Amendment Section		

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

CR2E045 (8/05)

TO:

Amendment Section



July 27, 2012

ED KOZIOL WOMENS SHOES ONLY, INC. 8956 TUSCAN VALLEY PLACE ORLANDO, FL 32825

SUBJECT: WOMENS SHOES ONLY, INC.

Ref. Number: P12000001521

We have received your document for WOMENS SHOES ONLY, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The current name of th gentity is as referenced above. Please correct your document accordingly.

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton Regulatory Specialist II

Letter Number: 412A00019795



ATEMENT 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 ofin order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: WOMENS SHOES ONLY, INC.
2. The principal office address: 8956 Tuscan Valley Pl Orlando Fl 32825
3. The mailing address (if different): SAME
4. Date of incorporation/qualification: 1-5-3012 Document number: P12000001521
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) BIZ Filings BUSINESS Filings Incorporated 8040 Excelsion Dr. Suite 200
8040 Excelsion Dr Suite 200
Madison WI 53717
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): Edvin Koziol 8956 Tuscan Valley Pl P.O. Box NOT acceptable Orlando Fl 32825
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. Lawn M 200 Person Signature of an officer or director: 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: Edwin M Kozrol
Typed or Printed Name

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