

P12000017652

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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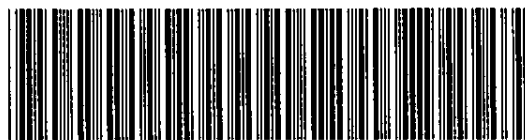
(Business Entity Name)

(Document Number)

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**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**Club Italia Apaprel Organization inc**

**SUBJECT:** \_\_\_\_\_  
Name of Corporation  
**p12000017652**

**DOCUMENT NUMBER:** \_\_\_\_\_

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:

**Paige Evangelista**

\_\_\_\_\_  
Name of Contact Person  
**CIAO**

\_\_\_\_\_  
Firm/Company  
**650 Hannah Park Lane**

\_\_\_\_\_  
Address  
**St Augustine, FL 32095**

\_\_\_\_\_  
City/State and Zip Code  
**guido@ciaobellainc.it**  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

**G. Vincenzo Evangelista** at ( **305** ) **307-1653**  
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.

Club Italia Apparel Organization Inc

1. The name of the corporation 650 Hannah Park Lane, St Augustine, FL 32095

2. The principal office address: \_\_\_\_\_

3. The mailing address (if different): \_\_\_\_\_

02/21/2012

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4. Date of incorporation/qualification: \_\_\_\_\_ Document number: \_\_\_\_\_

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)  
corporation service company

1201 Hays Street

Tallahassee, FL 32301

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Paige Evangelista

650 Hannah Park Lane

P.O. Box NOT acceptable

St Augustine, FL 32095

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

G. Vincenzo Evangelista

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:

Paige Evangelista  
Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE  
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

CR2E045 (03/12)

12 OCT 29 AM 11:54  
TALLAHASSEE, FLORIDA  
DIVISION OF CORPORATIONS