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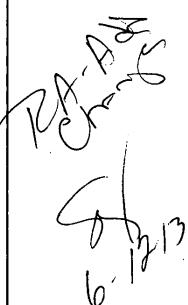
(Requestor's Name)				
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Cityle	State/Zip/Phon	a #1		
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PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Fil	ing Officer:			

Office Use Only



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COVER LETTER

TO: Amendment Section Division of Corporations

Change of Street Address of Registered Agent

Name of Corporation

P13000040338

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:

Judith Thompson

Name of Contact Person

Hot City Fashions Inc.

Firm/Company

267 SE Abernathy Cir.

Palm Bay, FL 32909

City/State and Zip Code

preciouswar@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Judith Thompson

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

CR2E045 (03/12)

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

	•	617.0502, 607.1508, or 617.1508, Florida Statutes, n organized under the laws of the State of Florida	this	_
		r registered agent, or both, in the State of Florida.		_
1. The name of	the corporation: Hot City Fas	hions Inc.		<u> </u>
2. The principal	office address: 4835 West E	au Gallie Blvd., AW11 & AW12		
<u> </u>	ne, FL 32934			<u> </u>
3. The mailing a	address (if different): 267 SE A	Abernathy Circle		
4. Date of incor	poration/qualification: 5/6/13	Document number: P130000403	338	
5. The name an		stered agent and registered office on file with the resigned)		
	Judith Thompson Ms.			
	2400 W. New Haven Av	venue, U.S. 192		_
	West Melbourne, FL 32	2904	ヹ	SIAIT
6. The name and (if changed):	<u> </u>	red agent (if changed) and /or registered office	O1 NOC EI	CRETARY
	Judith Thompson		좦	육숙
	4835 West Eau Gallie E	Blvd., AW11 & AW12	Č.	STA
	Melbourne, FL 32934	Box NOT acceptable	.	SNO!
The street addr as changed will	ess of its registered office and the	e street address of the business office of its registe	red age	ent,
Such change wauthorized by t	as authorized by resolution duly a he board, or the corporation has b	adopted by its board of directors or by an officer s seen notified in writing of the change.	ю	
Judith	Thompson	Judith Thompson -President		_
I hereby accept I further agree performance of agent. Or, if th	t the appointment as registered as to comply with the provisions of f mv duties, and I am familiar wit.	Printed or typed name and title gent and agree to act in this capacity, all statutes relative to the proper and complete h and accept the obligation of my position as regi. to reflect a change in the registered office addres otified in writing of this change.	stered ss, I	
Judith	Thompson	06/05/13		_
	gnature of Registered Agent chalf of an entity:	Date		
	Eurod or Printed Name	_		
1	Typed or Printed Name	NC FFF- \$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)