

P94000014351

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

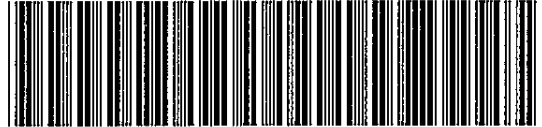
(Document Number)

Certified Copies _____

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07/22/04--01031--013 **35.00

PA
Change

RECEIVED
04 JUL 22 AM 11:22
TALLAHASSEE, FLORIDA
STATE
SECRETARY OF STATE
DIVISION OF CORPORATIONS
REGISTRATION

FILED
04 JUL 22 PM 12:52
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

CT CORP!

July 22, 2004

Secretary of State, Florida
409 East Gaines Street
Tallahassee FL 32399

Re: Order #: 6151744 SO
Customer Reference 1:
Customer Reference 2:

Dear Secretary of State, Florida:

Please file the attached:

~~Kenneth Cole Services Inc. (DE)~~
~~Change of Agent~~
~~Florida~~

Cole South Beach (FL)
Change of Agent
Florida

Enclosed please find a check for the requisite fees. Please return evidence of filing(s) to my attention.

If for any reason the enclosed cannot be filed upon receipt, please contact me immediately at (850) 222-1092. Thank you very much for your help.

Sincerely,

Ashley A Mitchell
Fulfillment Specialist
Ashley_Mitchell@cch-lis.com

**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: COLE SOUTH BEACH, INC.

2. The principal office address: 603 W. 50TH STREET NEW YORK, NY 10019

3. The mailing address (if different): _____

4. Date of incorporation/qualification: 12/26/2002 Document number: P94000014351

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

NATIONSCORP REGISTERED AGENTS, INC

526 E. PARK AVENUE TALLAHASSEE FL 32301

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

C T Corporation System

c/o C T Corporation System

(P.O. Box or personal mailbox NOT acceptable)

1200 South Pine Island Road, Plantation, Florida 33324

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, chairman or vice chairman of the board)

(Printed or typed name and title)

Jill E. Kranz
Vice President

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.

By: Sheila Clark
(Signature of Registered Agent)

(Date)

If signing on behalf of an entity:

(Typed or Printed Name)

SHEILA CLARK
Assistant Secretary

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

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