

P95 0000 17862

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

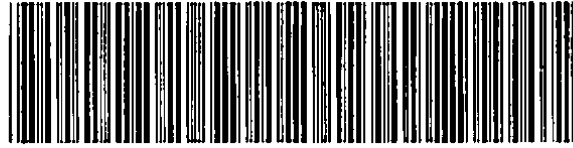
(Business Entity Name)

(Document Number)

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11/21/15 3:10:59 PM

R. WHITE
JAN 10 2020

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Contemporary Cruises, Inc.
Name of Corporation

DOCUMENT NUMBER: 3246137

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:

Donald S Lipsy

Name of Contact Person

CRUISE DESIGN

Firm/Company

2446 NW 67th Street

Address

Boca Raton

City/State and Zip Code

Florida 33496-2003

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

For further information concerning this matter, please call:

Donald Lipsy

Name of Contact Person

at (954) 646 5877

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 19, 2019

DONALD S LIPSY
2446 NW 67TH ST
BOCA RATON, FL 33496

SUBJECT: CONTEMPORARY CRUISES, INC.
Ref. Number: P95000017862

We have received your document for CONTEMPORARY CRUISES, 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):

Part 6 cannot be left blank. Please complete part 6 with the new registered agent information.

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.

Rebekah White
Regulatory Specialist II Supervisor

Letter Number: 319A00025815

2020 JAN -3 PM 3:58

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: Contemporary Cruises, Inc.
2. The principal office address: 2446 NW 67th St
Boca Raton, Florida 33496-2003
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 03/03/1995 Document number: 3246137

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)

Rhoda Cone
2446 NW 67th St
Boca Raton, FL 33496

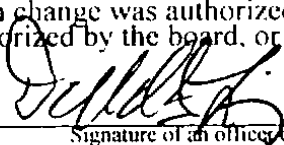
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

RHODA CONE
2446 NW 67TH ST
BOCA RATON, FL 33496
P.O. Box NOT acceptable

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 authorized by the board, or the corporation has been notified in writing of the change.

2020 JUN -3 AM 11:00



Signature of an officer or director

Donald Lipsy, President

Printed or typed name and title

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.

November 19, 2019

Signature of Registered Agent

Date

If signing on behalf of an entity:

Typed or Printed Name

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

CK # 1879

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