Division of Corporations **Electronic Filing Cover Sheet**

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(((H10000268573 3)))



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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Number: 072450003255

Account Name : EMPIRE CORPORATE KIT COMPANY

Fax Number

: (305)634-3694 : (305)633-9696

The email address for this business entity to be used for 🎉 annial report mailings. Enter only one email address please. 🕏

REGISTERED AGENT CHANGE HERITAGE SCHOONER CRUISES, INC.

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Corporate Filing Menu

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EMPIRE CORP KIT

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12/14/2010

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COVER LETTER

TO:	Amendment Section Division of Corporation	and				
SUBJE	ct:HER	ITAGE SCOON	ER CRI	JISES, INC.		
		Name of	Corporation)ū		
DOCU	MENT NUMBER:	P9	7000 <u>02</u>	2574		
The end	closed Statement of Ch	ange of Registered Off	fice/Agent	and fee are submi	itted for filing.	
Please :	return all corresponden	ce concerning this mat	ter to the f	ollowing:		
	·	Neil Bayer, Esquire Name of Contact Person				
		SARNOF	FF & BAY	'ER		
	Firm/Company					
	201 South Biscayne Boulevard, Suite 915 Address					
		Miami, City/State	FL 3313 and Zip Co	1		
	E-mail ad	nbayer@a dress: (to be used for	attglobal.r	ret	fication)	
For furt	her information concer	ning this matter, please	z call;		·	
· •	Sandy Basom, Lo		st (305	441-5966 me Telephone Number	
Enclose	d is a \$35.00 check ma	de payable to the Depa				
	Amer Divis P.O. I	ag Address: adment Section lon of Corporations Box 6327 hassee, FL 32314		Street Address: Amendment Sc Division of Co Clifton Buildin 2661 Executiv Tallahassee, F	ection orporations og e Center Circle	
CR2E045	(8/05)	+	4100	00270	8573	

H10000268673

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

1. The name of	office address: 3145 Virginia Street, Miami, FL 33133		
3. The mailing a	ddress (if different):		
4. Date of incom	poration/qualification: 03/06/1997 Document number: P9700	00022574	
	street address of the current registered agent and registered office on file with the trnent of State: (If resigned, enter resigned)		
	Neil Bayer, Esquire		
	3000 Shipping Avenue	en e	
	Coconut Grove, FL 33133		\$
6. The name and (if changed):	street address of the new registered agant (if changed) and /or registered office	-	
	Neil Bayer, Esquire	70 2	¥ (
	Suite 915, 201 South Biscayne Boulevard	***	و ج
	P.O. Box. NOT acceptable	260 - 75	<u> </u>
	Miami, FL 33131	3 77	ייש
	ess of its registered office and the street address of the business office of its regis be identical.		
authorized by the	is authorized by resolution duly adopted by its board of directors or by an office to board, or the corporation has been notified in writing of the change.		
Signatu	e of an officer of descape. Printed or typed name and fale		
I hereby accept I further agree of my duties, an document is bei corporation has	the appointment as registered agent and agree to act in this capacity, to comply with the provisions of all statutes relative to the proper and complete d I am familiar with and accept the obligation of my position as registered ages ng filed merely to reflect a change in the registered office address, I hereby com been notified in writing of this change.	performance it. Or, if this firm that the	! !
-M	cal By 12/14/10		
	half of an entity:		
	•		

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (8/05)

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