

P99000076453

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

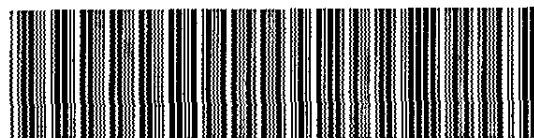
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



700009651487

RA  
Change

RECEIVED  
03 JAN -2 AM 11:50  
STATE DEPARTMENT OF REVENUE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

FILED  
03 JAN -2 PM 3:20  
SECOND PART OF STATE  
TALLAHASSEE, FLORIDA

X00789, 00721, 00672

13/03



ACCOUNT NO. : 072100000032

REFERENCE : 875348 4720431

AUTHORIZATION :

COST LIMIT : \$ 35.00

*Patricia Pizut*

ORDER DATE : December 30, 2002

ORDER TIME : 8:30 AM

ORDER NO. : 875348-565

CUSTOMER NO: 4720431

CUSTOMER: Ms. Tina Grodziski  
Charming Shoppes, Inc.  
450 Winks Lane

Bensalem, PA 190200000

CHANGE OF AGENT

NAME: LANE BRYANT #6344, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

           CERTIFIED COPY  
XX            PLAIN STAMPED COPY

CONTACT PERSON: Troy Todd -- EXT# 1140

EXAMINER: \_\_\_\_\_



FLORIDA DEPARTMENT OF STATE

Jim Smith  
Secretary of State

January 2, 2003

CSC  
Atten: Troy Todd  
1201 Hays Street  
Tallahassee, FL 32301

SUBJECT: LANE BRYANT #6344, INC.  
Ref. Number: P99000076453

**RESUBMIT**

Please give original  
submission date as file date.

We have received your document for LANE BRYANT #6344, 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):

Our records indicate the current name of the entity is as it appears on the enclosed computer printout. Please correct the name throughout the document.

If you have any questions concerning the filing of your document, please call (850) 245-6907.

Annette Ramsey  
Document Specialist

Letter Number: 703A00000143

RECEIVED  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

03 JAN -3 AM 8:38

RECEIVED

**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: LANE BRYANT #6344, INC.
2. The principal office address: \_\_\_\_\_  
Northridge Shopping Plaza, E. Commercial Blvd., Oakland Park, FL 33334
3. The mailing address (if different): 3750 State Road, 7B13, Bensalem, PA 19020
4. Date of incorporation/qualification: August 26, 1999 Document number: P99000076453
5. The name and street address of the current registered agent and registered office on file with the  
Florida Department of State:

C T Corporation System

1200 South Pine Island Road

Plantation, FL 33324

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

Corporation Service Company

1201 Hays Street

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

Tallahassee, FL 32301

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.

Maureen Cullen  
(Signature of an officer, chairman or vice chairman of the board)

Maureen Cullen, Attorney-in-Fact  
(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.*

Jacqueline M. Giles  
(Signature of Registered Agent)

December 31, 2002

(Date)

If signing on behalf of an entity:

Jacqueline M. Giles

(Typed or Printed Name)

Assistant Vice President

(Capacity)

\*\*\* 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

FILED  
03 JAN 2 PM 3:20  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA