## P99000107938

(Re	equestor's Name)			
(A	ddress)			
(A	ddress)			
(C	ity/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
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2021 JAN - 4 PM 4: 32 SECRETARY OF STATE

2/12/21

## COVER LETTER

TO:	Amendment Section Division of Corporations				
	•	•			
STIR I	IECT: AMAZING CRUISES, INC.				
Name	of Corporation				
	D0000107029				
DOC	UMENT NUMBER: P99000107938	<del></del>			
The e	nclosed Statement of Change of Registered	Office/Agent and fee are submitted for filing.			
Please	e return all correspondence concerning this	matter to the following:			
Mark	Zilbert				
Name	of Contact Person	<del></del>			
	ing Cruises, Inc.				
Firm/	Company	<del></del>			
	5th Street Suite 200				
Addro	ess	<del></del>			
Miam	i Beach, FL 33139				
City/S	State and Zip Code				
	mark.zilbert@amazingcruises.	com			
E-ma	il address: (to be used for future annual	report notification)			
For fu	urther information concerning this matter, pl	lease call:			
Mark	Zilbert	at (786 ) 280-0201			
	Name of Contact Person	at (786 )280-0201 Area Code & Daytime Telephone Number			
Enclo	sed is a \$35.00 check made payable to the I	Department of State.			
	Mailing Address:	Street Address:			
	Amendment Section	Amendment Section			
	Division of Corporations	Division of Corporations			
	P.O. Box 6327	The Centre of Tallahassee			

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

CR2E045 (04/13)

Tallahassee, FL 32314

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

Pursuant to the provisions of sections 607.05 statement of change is submitted for a corpor	ration organized under the laws of th	e State of Florida	
in order to change its registered offi	ice or registered agent, or both, in the	e State of Florido	Ten dal
1. The name of the corporation: Amazing Cru	uises, Inc.	2021 JAN -4	PM 4: 32
2. The principal office address: 1000 5th Street	et Suite 200, Miami Beach, FL 33139	SECRETAR) TALLAHA	
3. The mailing address (if different):			
4. Date of incorporation/qualification: 01/01/	/2000 Document number	. P99000107938	
5. The name and street address of the current Florida Department of State: (If resigned,		e on file with the	
Mark Zilbert			
400 Alton Rd Apt 3503			_
Miami Beach, FL 33139		<del></del>	
(if changed):  Mark Zilbert			
1000 5th Street Suite 200	P.O. Box NOT acceptable	<del>.</del>	
Miami Beach, Fl. 33139	No. No. No. acceptable		
The street address of its registered office an as changed will be identical.	nd the street address of the business	office of its regi	stered agent
Such change was authorized by resolution cauthorized by the board, of the corporation	duly adopted by its board of director has been notified in writing of the c	s or by an office hange.	er so
Mar Je	Mark Zilbert - Vice Pre		
Signature of an officer or director	••	ed name and title	
I hereby accept the appointment as register I further agree to comply with the provision of my duties, and I am familiar with and accoument is being filed merely to reflect a corporation has been notified in writing of	ns of all statutes relative to the prope cept the obligation of my position as change in the registered office addre	er and complete	performanc nt. Or, if thi. firm that the
Mary	December 28, 2020		
Signature of Registered Agent	D	ate	
If signing on behalf of an entity:			
Mark Zilbert			
Typed or Printed Name	<del></del>		

\* \* \* FILING FEET \$35:00 \* \* \*