

N09 00000909B

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

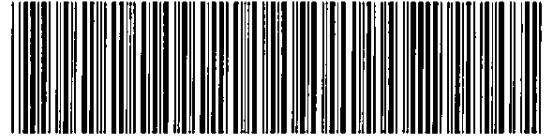
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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: BULLDOG BASEBALL BOOSTER, INC.
Name of Corporation

DOCUMENT NUMBER: N09000009093

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:

Karah Panaro

Name of Contact Person

Bulldog Baseball Booster, Inc.

Firm/Company

P.O. Box 274

Address

Hobe Sound, FL 33475

City/State and Zip Code

sbulldogsbaseball@gmail.com

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

For further information concerning this matter, please call:

Karah Panaro

Name of Contact Person

at (831) 461-5257

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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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: BULLDOG BASEBALL BOOSTER, INC
 2. The principal office address: 10000 SW BULLDOG WAY, STUART, FL 34997

3. The mailing address (if different): P.O. Box 274, Hobe Sound, FL 33475

4. Date of incorporation/qualification: n/a Document number: N09000009093

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)

resigned

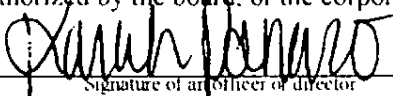
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Karah Panaro
8703 SE Sandcastle Circle
P.O. Box NOT acceptable
Hobe Sound, FL 33455

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 DIVISION OF CORPORATIONS

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 or director

Karah Panaro, 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.


Signature of Registered Agent

2/20/2024
Date

If signing on behalf of an entity:

Typed or Printed Name

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

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