

P05000129708

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

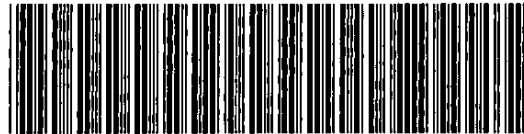
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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05/18/06--01034--028 **35.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
06 MAY 18 PM 3:26

Amendment

05/30/06

De

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: ED BAUR MANAGEMENT, INC., a Florida corporation
(Name of Corporation)

DOCUMENT NUMBER: K27534

The enclosed ~~Resignation~~ ^{CHANGE} of Registered Agent for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Weston Baur

(Name of Person)

Ed Baur Management, Inc.

(Name of Firm/Company)

1731 NW 6th Street, Ste A

(Address)

Gainesville, FL 32601

(City/State and Zip Code)

For further information concerning this matter, please call:

Weston Baur

(Name of Person)

at (352)

372-3674

(Area Code & Daytime Telephone Number)

Enclosed is a check made payable to the Florida Department of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

Street Address:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Mailing Address:

Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

**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: ED BAUR MANAGEMENT, INC., a Florida corporation
2. The principal office address: 1731 NW 6th Street, Suite A, Gainesville, FL 32601
3. The mailing address (if different): same
4. Date of incorporation/qualification: 7/1/1988 Document number: K27534
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Edward O. Baur

16718 NW 40th Place

Newberry, Florida 32669

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

Weston Baur

520 NW 96th Way

(P.O. Box NOT acceptable)

Gainesville, FL 32606

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.

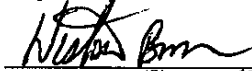


(Signature of an officer or director)

Weston Baur

(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)

Weston Baur

If signing on behalf of an entity:

Ed Baur Management, Inc.

(Typed or Printed Name)

5-1-06

(Date)

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

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
06 MAY 18 PM 3:26

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Dissolution of Nonprofit

DOCUMENT NUMBER: N05000007325

The enclosed **Articles of Dissolution** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Kristin Bergeron
(Name of Contact Person)
O.K. Opportunity Knocks, Inc
(Firm/Company)
2341 Markingham Road
(Address)
Maitland, FL 32751
(City/State and Zip Code)

For further information concerning this matter, please call:

Kristin Bergeron at (407) 260-8068
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☐ \$35 Filing Fee ☐ \$43.75 Filing Fee & Certificate of Status ☐ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) ☒ \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)

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

ARTICLES OF DISSOLUTION

Pursuant to section 617.1401, Florida Statutes, this Florida not for profit corporation submits the following Articles of Dissolution:

FIRST: The name of the corporation as currently filed with the Florida Department of State:

O.K. Opportunity Knocks, Inc.

SECOND: The document number of the corporation (if known): N05000007325

THIRD: The file date of the articles of incorporation: July 18, 2005

FOURTH: The corporation has not commenced to conduct its affairs.

FIFTH: No debts of the corporation remains unpaid.

SIXTH: Adoption of Dissolution **(CHECK ONE)**
(Note: Cannot be authorized by an incorporator if the corporation has directors)

☒ The dissolution was authorized by a majority of the directors:
OR

☐ The dissolution was authorized by an incorporator.

☐ The dissolution was authorized by a majority of the incorporators.

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DIVISION OF CORPORATIONS
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Signature: _____

(By the chairman or vice chairman of the board, president or other officer- if directors have not been selected, by an incorporator- if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary)

Kristin Bergeron

(Typed or printed name of person signing)

President

(Title of person signing)

Filing Fee: \$35