

P20 000023494

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

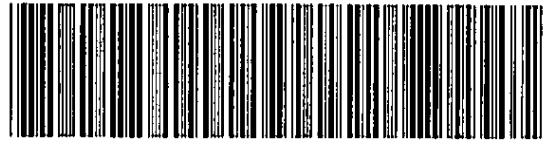
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

8/9

Office Use Only



300365428403

RECEIVED

MAY 03 2021

05/04/21--01015--003 **35.00

FILED
2021 AUG -9 PM 1:36
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RACH

AUG 24 2021
D CONNELL



RECEIVED

2021 AUG -9 PM 1:45

FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 14, 2021

ATTN: RAYNELL NELSON
4106 E OKARA RD
TAMPA, FL 33617

SUBJECT: BA4M ENTERPRISES, INC.
Ref. Number: P20000023494

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

We have received your document for BA4M ENTERPRISES, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for completion of the enclosed affidavit as well as the following correction(s).

To change the registered agent or registered office, or both, the enclosed form should be completed and returned to this office with a filing fee of \$35.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

SASHA B PENNYWELL
Regulatory Specialist II

Letter Number: 321A00013184

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: BA4M Enterprises Inc.
Name of Corporation

DOCUMENT NUMBER: P20000002349

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:

Shannon Richardson
Name of Contact Person

Firm/Company

4106 E. Okara Rd.
Address

Tampa, FL 33617
City/State and Zip Code

E-mail address: (to be used for future annual report notification) changis03@yahoo.com

For further information concerning this matter, please call:

Shannon Richardson at (813) 770-3507
Name of Contact Person 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