

# 108637

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

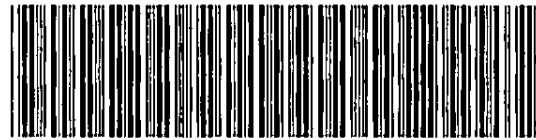
(Business Entity Name)

(Document Number)

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## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: W.S. Badcock Corporation  
Name of Corporation

DOCUMENT NUMBER: 108637

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:

Debbie Canova

Name of Contact Person

W.S. Badcock Corporation

Firm/Company

200 North Phosphate Boulevard

Address

Mulberry, Florida 33860

City/State and Zip Code

Debbie.Canova@Badcock.com

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

For further information concerning this matter, please call:

Krysta McGuire

Name of Contact Person

at ( 863 ) 617-9679

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  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**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: W.S. Badcock Corporation
2. The principal office address: 200 North Phosphate Boulevard, Mulberry, Florida 33860
3. The mailing address (if different): P.O. Box 497, Mulberry, Florida 33860
4. Date of incorporation/qualification: 03/10/1926 Document number: 108637
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)

Phillip Bayt  
217 N.W. 1st Avenue  
Mulberry, Florida 33860

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

Phillip Bayt  
200 North Phosphate Boulevard  
P O Box NOT acceptable  
Mulberry, Florida 33860

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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.

Clara Arrington \_\_\_\_\_  
Signature of an officer or director Printed or typed name and title  
Clara Arrington, Director /Assistant General Counsel

*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.*

Phillip Bayt \_\_\_\_\_  
Signature of Registered Agent Date  
11/25/2019

If signing on behalf of an entity:  
\_\_\_\_\_  
Typed or Printed Name

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