## 534429

(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:

Office Use Only



200013261052

00.25\*\*\* 029--029 \*\*35.00

FILED
2003 MAR 10 PM 12: 40

03 HAR 10 AM 11: 2:

DEPART OF A STATE

NUMBER OF A STATE

RECEIVED

C. Coulliste MAR 1 0 2003

## **CT** CORPORATION SYSTEM

March 10, 2003

Secretary of State, Florida 409 East Gaines Street Tallahassee FL 32399

Re: Order #: 5803804 SO

Customer Reference 1: Customer Reference 2:

Dear Secretary of State, Florida:

Please file the attached:

Blue Lagoon, Inc. (FL)
Change of Agent-

Florida

Enclosed please find a check for the requisite fees. Please return evidence of filing(s) to my attention.

If for any reason the enclosed cannot be filed upon receipt, please contact me immediately at (850) 222-1092. Thank you very much for your help.

Sincerely,

Katrina Forsman
Fulfillment Specialist
Katrina\_Forsman@cch-lis.com

660 East Jefferson Street Tallahassee, FL 32301 Tel. 850 222 1092 Fax 850 222 7615

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

Pursuant to the provisions of				08, Florida Si	tatutes,
the undersigned corporation of submits the following statemen	~	<del>-</del>		end agent or h	noth in
the State of Florida.	i in order to change	tis registereu	office of register	eu ugem, or e	~
1. The name of the corporation	: Blue Lagoon, Inc.				
ŕ				H	HAR
2. The mailing address of the c	orporation : 1201 Hay	s Street, Tallahas:	see, FL 32301	SSEE F	ILED PH
3. Date of incorporation/qualif	ication: 05/25/1977	Do	cument number:	534429	‡.
4. The name and address of the				Þ	<del>- 0</del>
Corporation Servi	ce Company			~	•
1201 Hays Street		- 	<u>.</u>	_	
Tallahassee, FL 3	2301				
5. The name and address of the		nt (if changed) a ot Acceptable)	nd/or registered	office (if chan	ged):
C T Corporation S	ystem	*** 		··.	
c/o C T Corporation	on System, 1200 South	Pine Island Road,		æ,	
Plantation, Florida	1 33324				
The street address of its register agent, as changed, will be iden					
Such change was authorized by authorized by the board.	y resolution duly ad	opted by its boa	ard of directors of	or by an office	r so
77 Oct	<b></b>	= <u>**</u>		107/03	
(Signature of an officer, chairm	an or vice chairman of the	board)	.∧ī	Sate)/	
(Printed or typ	ed name and title)			ਜ਼ -	
Having been named as register corporation, I hereby accept the I further agree to comply with performance of my duties and registered agent.  C T Corporation System	he appointment as re the provisions of al	egistered agent l statutes relati	and agree to ac ve to the proper	t in this capac and complete	city.
By: (Signature of Register	ed Agent)		S/7(20)	كەلا	<del></del>
If signing on behalf of an entity:	Mark Holl	owig Assi	Secretary		
(Typed or Printed Na	me)		(Capacity)		<u> </u>

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

CR2E045(9/00)

**DIVISION OF CORPORATIONS** 

P.O. Box 6327

TALLAHASSEE, FL 32314