695411

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5a 10/04/20

COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: BAUR & KLEIN PA Name of Corporation	_
DOCUMENT NUMBER: 695411	
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:
CHRISTOPHER J KLEIN	
Name of Contact Person	
BAUR & KLEIN PA	
Firm/Company	
11767 S DIXIE HWY # 103	
Address	
MIAMI, FL 33156	
City/State and Zip Code	
CKLEIN@WORLDWIDEL4	
E-mail address: (to be used for future annual	report notification)
For further information concerning this matter, p	lease call:
CHRISTOPHER KLEIN	31 (305) 377 3561
Name of Contact Person	at (305) 377 3561 Area Code & Daytime Telephone Number
Enclosed is a \$35.00 check made payable to the I	Department of State.
Mailing Address: Amendment Section	Street Address:
Amendment Section Division of Corporations	Amendment Section Division of Corporations
P.O. Box 6327	The Centre of Tallahassee
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810
	Tallahassee, FL 32303

CR2E045 (04/13)

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

statement of cha	mge is submitted	d for a corporation	17.0502, 607.1508, or 617.1508, Florida S organized under the laws of the State of $\frac{F}{F}$ registered agent, or both, in the State of Fi	FLORIDA		-
1. The name of	the corporations	BAUR & KLEIN	PA			
2. The principal	•	1001 PDIOKELL	BAY DRIVE, SUITE 2719		·	
z. The principal	office address.	MIAMI, FL 3313	1	,		_
3. The mailing a	ddress (if differ	ent): 11767 S. D	IXIE HWY # 103 , MIAMI FL 33156			_
4. Date of incorp	ooration/qualific	oation: 07/21/198	Document number: 695411			
5. The name and	l street address		tered agent and registered office on file wit	h the		
	REGISTERZE	ENTRALE, LLC				
	1001 BRICKELL BAY DRIVE, SUITE 1200			<i>U)</i> _,rn	202	
	MIAMI, FL 33	131		ALL ALL	2020 AUG 26	47
6. The name and (if changed):	l street address (of the new registere	ed agent (if changed) and /or registered offi	TARY OF	36 PM	
	REGISTERZE	NTRALE, LLC		m _o ,	3: 34	ζ
	1001 BRICKE	LL BAY DRIVE, S	UITE 2719		ဍ	
	-		P.O. Box NOT acceptable			
	MIAMI, FL 33	131 ———————				
The street addre as changed will	ess of its registe be identical.	ered office and the	street address of the business office of its	register	ed ager	nt.
Such change wa authorized by th	as authorized by ne board, or the	y resolution duly a corporation has be	dopted by its board of directors or by an open notified in writing of the change.	officer so)	
	11UL		CHRISTOPHER J KLEIN			_
Signatuj			Printed or typed name and title			
i nereby accept I furthér agrée i of my duties, an document is bei corporation has	the appointment of comply with a distribution of the complete	n as registered ag the provisions of a with and accept the to reflect a chang in writing of this c	ent and agree to act in this capacity. Il statutes relative to the proper and com he obligation of mv position as registered e in the registered office address, I hereby hange.	plete per 'agent. (v confirn	forman Or, if th n thát t	ice his he
(-11/2		8/24/2020			
Sign	nature of Registered	Agent	Date			-
If signing on be	half of an entity	y:				
CHRISTOPHER	R J KLEIN					
Ty	ped or Printed Name	e	•			

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