

A11000000056

(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



800284750388

04/21/16--01019--006 **52.50

RECEIVED
DEPARTMENT OF STATE
16 APR 21 AM 11:35

FILED

2016 APR 21 A 9:13
SECRETARY OF STATE
TAMMASEE, FLORIDA

APR 22 2016

S MASON

CT Corporation System

515 E Park Avenue, Tallahassee, FL, 32301 850-222-1092

Baseline Consulting, LLLP

A11000000056

☐ Nonprofit

☐ Foreign

☐ Amendment

☐ Merger

☐ Limited Partnership

☐ Dissolution/Withdrawal

☐ Mark

☐ LLC

☐ Reinstatement

☐ Annual Report

☐ Name Registration

☒ Other
Change of Agent

☐ Certified Copy

☐ Fictitious Name

☐ UCC

☐ Call When Ready

☒ Walk In

☐ Photocopies

☐ Mail Out

☐ CUS

☐ After 4:30

☐ Call If Problem

☒ Pick Up

☐ Will Wait

Name

Availability _____

Document

4/21/2016

Order#:

Examiner _____

9973185

Updater _____

KM

Verifier _____

Ref#:

W.P. Verifier _____

Amount: \$

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: BASELINE CONSULTING, LLLP
Name of Limited Partnership or Limited Liability Limited Partnership

DOCUMENT NUMBER: A11000000056

The enclosed Statement of Change of Registered Office and/or Registered Agent and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Jennifer Tasevoli

Contact Person

CT Corporation

Firm/Company

900 Merchants Concourse Ste 405

Address

Westbury, NY 11590

City, State and Zip Code

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

For further information concerning this matter, please call:

Jennifer Tasevoli

Name of Contact Person

at (888)

5790286

Area Code and Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Florida Department of State.

STREET ADDRESS:

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

MAILING ADDRESS:

Registration Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

Pursuant to the provisions of section 620.1115, Florida Statutes, the undersigned limited partnership or limited liability limited partnership submits the following statement in order to change its registered office or registered agent, or both, in the state of Florida.

2. 01/18/2011 Date of filing/registration in Florida

3. A11000000056 Florida document number

John A. Williams
Name
7408 Van Dyke Road
Address
Odessa, FL 33556
City, State and Zip

CT Corporation System

Name

1200 South Pine Island Road

Florida street address (P.O. Box not acceptable)

Plantation FL 33324

City, State and Zip

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 obligations of my position as registered agent.

Filing Fee: \$35.00
Certified Copy (optional): \$52.50

Karen Fuglestad
CT Corporation

2016 APR 21 A 9:13
CLERK OF STATE
TALLAHASSEE, FLORIDA