

D980000000015

(Requestor's Name)

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(Business Entity Name)

(Document Number)

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change

10 ACKNOWLEDGE
SUFFICIENCY OF FILING

16 MAR 29 PM 2:14

RECEIVED
MAR 29 2016

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

16 MAR 29 PM 3:32

FILED

MAR 30 2016
A RAMSEY

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 081200 7448543

AUTHORIZATION :

COST LIMIT : \$35.00

ORDER DATE : March 29, 2016

ORDER TIME : 12:55 PM

ORDER NO. : 081200-025

CUSTOMER NO: 7448543

CHANGE OF AGENT

NAME: BUFFALO-VICTORIA BUSINESS
TRUST

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Courtney Williams

EXAMINER'S INITIALS: _____

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Buffalo-Victoria Business Trust

Name of ~~Corporation~~ Trust

DOCUMENT NUMBER: D98000000015

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:

Kim Taylor

Name of Contact Person

Benderson Development Company, LLC

Firm/Company

7978 Cooper Creek Blvd, Suite 100

Address

University Park, Florida 34201

City/State and Zip Code

taxdepartment@benderson.com

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

For further information concerning this matter, please call:

Kim Taylor

941

360-7259

at ()

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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR
BOTH FOR CORPORATIONS STATUTORY TRUST**

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 ^{Statutory Trust} ~~corporation~~ organized under the laws of the State of Delaware _____ in order to change its registered office or registered agent, or both, in the State of Florida.

- Declaration of Trust: _____
1. ~~The name of the corporation:~~ Buffalo-Victoria Business Trust
2. The principal office address: 7978 Cooper Creek Blvd, Suite 100, University Park, FL 34201

3. The mailing address (if different): 7978 Cooper Creek Blvd, Suite 100, University Park, FL 34201

4. Date of incorporation/qualification: March 26, 1998 Document number: D98000000015

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)

CT Corporation System

1200 South Pine Island Road

Plantation, FL 33324

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

Alicia H. Gayton, Esq.

7978 Cooper Creek Blvd, Suite 100

P.O. Box NOT acceptable

University Park

FL 34201


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.


Signature of an officer or director

David H. Baldauf Managing Trustee
Printed or typed name and title

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.

By: 
Signature of Registered Agent

March 28, 2016
Date

If signing on behalf of an entity:

Alicia H. Gayton

Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

CR2E045 (03/12)

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TALLAHASSEE, FLORIDA

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