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COVER LETTER

TO: Amendment Section Division of Corporations				
	nsultants, Inc.			
Name	of Corporation			
DOCUMENT NUMBER: F02000006442				
The enclosed Statement of Change of Registered C	Office/Agent and fee are submitted for filing.			
Please return all correspondence concerning this matter to the following:				
Nick Kains Name of	f Contact Person			
Baseline Consulte	n/Company			
2110 Deveseux C	Address Suite 200			
Bismingham AL City/Sta				
<u>NKarus @ baseline</u> E-mail address: (to be used to	or future annual report notification)			
For further information concerning this matter, ple	ase call:			
Name of Contact Person	at (<u>205</u>) <u>986 - 5932</u> Area Code & Daytime Telephone Number			
Enclosed is a \$35.00 check made payable to the De	epartment of State.			

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

Mailing Address:
Amendment Section

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

statement of cha	inge is submitted for a corporation orga	02, 607.1508, or 617.1508, Florida Statutes, i nized under the laws of the State of <mark>Alabam</mark> a	
		tered agent, or both, in the State of Florida.	
1. The name of t	he corporation: Baseline Consultan	ts, Inc.	.
	office address: 2110 DEVEREUX C	CIRCLE	
3. The mailing a			
4. Date of incorp	poration/qualification: 12/30/2002	Document number: F02000006442	2
	I street address of the current registered trent of State: (If resigned, enter resign	agent and registered office on file with the led)	
	CT CORPORATION SYSTEM		7 19
	1200 S. Pine Island Rd.		き
	Plantation, FL 33324		-
6. The name and (if changed):	d street address of the new registered age	ent (if changed) and /or registered office	TA HON THE PH TE WS
	InCorp Services, Inc.		
	17888 67th Court North		
	P.O. Box NO	T acceptable	
	Loxahatchee, FL 33470		
The street addre	ess of its registered office and the street be identical.	address of the business office of its register	ed agent,
Such change was authorized by the	s authorized by resolution duly adopte he board, or the corporation has been no	d by its board of directors or by an officer so of the change.)
	of an electrical r	SW17 W. COLLINS PRES	SIDENT
I further agrée t performance of	my duties, and I am familiar with and i	nd agree to act in this capacity. tutes relative to the proper and complete accept the obligation of my position as regis lect a change in the registered office addres. in writing of this change.	tered s, I
MW	Luy	October 28, 2014	
Signing on be	half of an entity;	Date	
Natalie Bale	es on behalf of Incorp Servi	ces, Inc.	

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