

Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number : (850)617-6380

Account Name : C T CORPORATION SYSTEM

Account Number : FCA00000023

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: (850)878-5368



REGISTERED AGENT CHANGE

GUNDERBOOM, INC.

Certificate of Status	0
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Page Count	02
Estimated Charge	\$35.00

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Corporate Filing Menu

Help



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

statement of cha	provisions of sections 607.0502, 617.050 inge is submitted for a corporation organ	nized under the laws q	f the State of Alaska	<u> </u>
	r to change its registered office or regist the corporation: GUNDERBOOM, INC.	erca agent, or both, in	the State of Florida	r.
	**			····
	office address:			
_	ddress (if different): N DR. SANFORD FL 32771			
4. Date of moor	oration/qualification: 5/19/2003	Document num	ber: P03000002564	.,
	street address of the current registered a tment of State:	gent and registered of	fice on file with the	
	BAKER & HOSTETLER			
	200 S ORANGE AVE, STE 2300			
	ORLANDO FL 32801 US			09 SEC
6. The name and (if changed):	street address of the new registered ages	, , ,	registered office	JUL -1
	C T Corporati	oa System		M _C
	c/o C T Corporation System, 13	200 South Pine Island I	Road	- (x) ==
	(P.O. Box NOT asseptiable)		-	3: 1 3: 1 3: 1 0:RID
	Plantation, Flo	rida 33324		7 E
	ss of its registered office and the street be identical. s guthorized by resolution duly adopte g board, or the corporation has been no			
21	り ' _ ' '		Dreyer, Pre:	
(Signete	THE OTHER OF GUARANT		A tabed united and rille)	31deiff
I hereby accept : I further agree to of my duties, and document is bein corporation has	the appointment as registered agent an a comply with the provisions of all stat d I am familiar with and accept the obl ng filed merely to reflect a change in th been notified in writing of this change.	d agree to act in this utes relative to the pr lgation of my position e registered office ad	capacity. coper and complete n as registered agei idress, I hereby con	performance it. Or, if this firm that the
By: Dell	alo Bulle abbure of Registered Agent)		1- 2009 (Date)	
If signing on bel				
	Barbara A. Burke yped or Primer Williams Secretary			
(1)	* * * FILING FE	CE: \$35,00 * * *		

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

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