## F0300004934

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
•				
PICK-UP WAIT MAIL				
· (Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Consider the street and the Siling Officers				
Special Instructions to Filing Officer:				

Office Use Only



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SECRETARY OF STATE
TALLAHASSEE, FLORINA.

HHA Anchemen

## **COVER LETTER**

TO:	Amendment Section Division of Corporations				
SUBJ	ECT: BAWI North, Inc. (Name of Corporation)				
DOCUMENT NUMBER: F03000004934					
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:				
	C. Wall				
(Name of Contact Person)					
National Corporate Services, Inc.  (Firm/Company)					
2 Club Centre Court, Suite 5 (Address)					
	Edwardsville, IL 62025				
(City/State and Zip Code)					
For fu	rther information concerning this matter, please call:				
	C. Wall at (866) 416-6274  (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

statement of cha	provisions of sections 607.0502, 617.0502, inge is submitted for a corporation organize r to change its registered office or registere	ed under the laws of the State of Delaware		
1. The name of t	he corporation:	BAWI North, Inc.		
2. The principal	office address: 800 Shades Creek Park	way, Suite 700,		
Birmingha	am, AL 35209			
3. The mailing a	ddress (if different):			
4. Date of incorp	poration/qualification: 9/30/03	Document number: F03000004	1934	
	I street address of the current registered agestment of State:	nt and registered office on file with the		
	C T Corporation System			
	1200 South Pine Island Road	<u> </u>	·	
	Plantation, FL 33324	-		
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):				
	NRAI Services, Inc.		N TO	
	2731 Executive Park Drive, S	Suite 4 SEE	F	
	(P.O. Box NOT acceptable)	The state of the s	<b>₽</b> □	
	Weston, FL 33331	- 95	ෆ්	
The street addre	ess of its registered office and the street ac be identical.	ldress of the business office of its egist	ter agent,	
Such change wa authorized by th	as authorized by resolution duly adopted be board, or the corporation has been notified.	by its board of directors or by an officer fied in writing of the change.	r so	
77 Zen	fre of an officer or director)	F. Eugene Woodham Presi	den+	
I hereby accept I further agree to of my duties, an document is be	the appointment as registered agent and to comply with the provisions of all statuted I am familiar with and accept the obliging filed merely to reflect a change in the status of this change.	agree to act in this capacity, es relative to the proper and complete pation of my position as registered agent registered office address, I hereby conf	performance t. Or, if this irm that the	
_ Ou O	gnature of Registered Agent)	(Date)	<u> </u>	
If circuing on habelf of an antitus				

If signing on behalf of an entity:

Sean L. Emerick, Asst. Secretary

(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 (8/05)