F06000003668

(Re	equestor's Name)	
(Ad	ldress)	_
(Ad	ldress)	
(Cit	ty/State/Zip/Phon	e #)
PICK-UP	MAIT	MAIL
(Pi	isiness Entity Nar	ma)
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(Do	cument Number)	•
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer	
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Office Use Only



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04/23/07--01026--034 **35.00



RA Chs.



11600 College Boulevard, Ste 210 Overland Park, KS 66210 800-550-6724 www.nrai.com

April 16, 2007

Amendment Section Division of Corporations PO Box 6327 Tallahassee, FL 32314

RE: Hayden Building Maintenance Corporation Florida Change of Agent

Dear Sir/Madam,

For the purposes of changing the registered agent and registered office of the above captioned Hayden Building Maintenance Corporation enclosed herewith, in duplicate, are a Statement of Change of Registered Office and/or Registered Agent accompanied by our check in the amount of Amount of Check.

Please proceed with the filing of the enclosed, returning official receipts and evidence in the enclosed Business Reply Envelope.

Thank you in advance for your cooperation in this matter.

Very truly yours,

Lisa Reeves

Enclosure - Check

COVER LETTER

TO: Amendment Section Division of Corporations			
SUBJECT: Hayden Building Maintenance Corporation			
(Name of Corporation	on)		
DOCUMENT NUMBER: F06000003668			
The enclosed Statement of Change of Registered Office/Agent a	and fee are submitted for filing.		
Please return all correspondence concerning this matter to the fo	ollowing:		
Lisa Reeves			
(Name of Contact Pers	son)		
National Registered Agents, Inc.			
(Firm/Company)			
11600 College Boulevard, Ste 2	10		
(Address)			
Overland Park, KS 66210			
(City/State and Zip Code)			
For further information concerning this matter, please call:			
Lisa Reeves at (9	13 \ 754-0637		
(Name of Contact Person) (A	13) 754-0637 rea Code & Daytime Telephone Number)		
Enclosed is a \$35.00 check made payable to the Department of State.			
Mailing Address:	Street Address:		
Amendment Section	Amendment Section		
Division of Corporations P.O. Box 6327	Division of Corporations Clifton Building		
Tallahassee, FL 32314	2661 Executive Center Circle		
	Tallahassee, FL 32301		

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

statement of chan	rovisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this age is submitted for a corporation organized under the laws of the State of New York to change its registered office or registered agent, or both, in the State of Florida.
1. The name of th	ne corporation: Hayden Building Maintenance Corporation
	office address: 169 Western Highway, West Nyack, NY 10994
3. The mailing ad	Idress (if different): PO Box G, West Nyack, NY 10994
4. Date of incorpo	pration/qualification: 5/23/2006 Document number: F0600003668
5. The name and : Florida Departi	street address of the current registered agent and registered office on file with the ment of State:
.	Check Mate Licensing Services
_	4411 Bee Ridge Road #257
_	Sarasota, FL 34233
6. The name and s (if changed):	street address of the new registered agent (if changed) and /or registered affice
	NRAI Services, Inc.
, -	2731 Executive Park Drive, Suite 4
_	Weston, FL 33331
The street addres as changed will b	s of its registered office and the street address of the business office of its registered agent, be identical.
Such change was authorized by the	s authorized by resolution duly adopted by its board of directors or by an officer so e board, or the corporation has been notified in writing of the change.
(Signature	Gregory P. Hayden, President (Printed or typed name and title)
I hereby accept th I further agree to of my duties, and document is bein corporation has l Lisa Ri	he appointment as registered agent and agree to act in this capacity. I comply with the provisions of all statutes relative to the proper and complete performance of all statutes relative to the proper and complete performance of am familiar with and accept the obligation of my position as registered agent. Or, if this age of the general performance of the filled merely to reflect a change in the registered office address, I hereby confirm that the been notified in writing of this change. **Received Assistant Secretary**
by: Lusa (Sign	ature of Registered Agent)
If signing on beh	alf of an entity:.
NRAI Servi	ces, Inc.

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

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