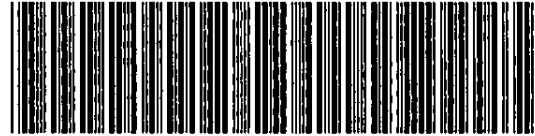


F12000000428

(Requestor's Name)

(Address)



400242303654

Mike Baxter Agency
46900 Bernmont Rd.
Unit 333
Punta Gorda, Fl. 33982

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

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12/04/12--01019--009 **35.00

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2013 JAN 22 AM 10:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

00706
*00789, 00524, 00671
1/23/13

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Mike Baxter Agency Inc.

Name of Corporation

DOCUMENT NUMBER: F12000000428

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:

S.M. Baxter

Name of Contact Person

Mike Baxter Agency Inc.

Firm/Company

46900 Bermont Rd. unit 333

Address

Punta Gorda, Fl. 33982

City/State and Zip Code

baxtermike876@gmail.com

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

For further information concerning this matter, please call:

S.M. Baxter

Name of Contact Person

at (843) 834-3633

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 5, 2012

Mike Baxter Agency
46900 Bermont Rd.
Unit 333
Punta Gorda, FL 33982

SUBJECT: MIKE BAXTER AGENCY, INC.
Ref. Number: F12000000428

We have received your document for MIKE BAXTER AGENCY, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document you submitted is incorrect. It appears to be from another state appointing a registered agent. I have enclosed a registered agent change form that you may fill out and return to us in order to change your registered agent.

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with a telephone number where you can be reached during working hours.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Annette Ramsey
Regulatory Specialist II

Letter Number: 412A00028904

RECEIVED

13 JAN 22 AM 8:31

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
PUNTA GORDA, FL 33982

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

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 corporation organized under the laws of the State of Florida _____ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Mike Baxter Agency Inc.
2. The principal office address: 46900 Bermont Rd. unit 333
Punta Gorda, FL 33982
3. The mailing address (if different): _____
4. Date of incorporation/qualification: Jan. 30, 2012 Document number: F12000000428
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)

S. Michael Baxter

46900 Bermont Rd, Unit 133

Punta Gorda FL 33982

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

S.M. Baxter

46900 Bermont Rd. unit 333

P.O. Box NOT acceptable

Punta Gorda, FL 33982

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

S.M. BAXTER PRES
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.


Signature of Registered Agent

1-8-13
Date

If signing on behalf of an entity:

S.M. Baxter

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)

FILED
2013 JAN 22 AM 10:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA