

F220000003120

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

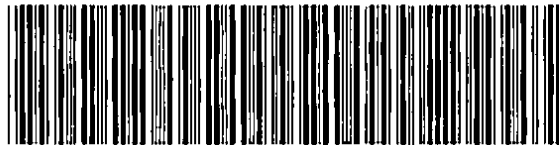
(Document Number)

Certified Copies _____

Certificates of Status _____

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Office Use Only



800390617698

Amend

2022 JUL -7 AM 9:24

FILED

A. RAMSEY

JUL 13 2022

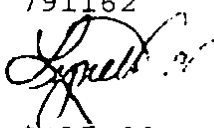
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

2022 JUL -7 PM 1:35

RECEIVED

*02250, 00524, 00671

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195
REFERENCE : 791162 7370415
AUTHORIZATION : 
COST LIMIT : \$ 35.00

ORDER DATE : July 6, 2022

ORDER TIME : 9:13 AM

ORDER NO. : 791162-005

CUSTOMER NO: 7370415

FOREIGN FILINGS

NAME: BAIRD & WARNER RESIDENTIAL
SALES, INC.

XX CORPORATE
 LIMITED PARTNERSHIP
 LIMITED LIABILITY COMPANY

XXXX AMENDMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Eyliena Baker -- EXT#

EXAMINER: _____



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 8, 2022

CORPORATION SERVICE COMPANY

TALLAHASSEE, FL 32301

SUBJECT: BAIRD & WARNER RESIDENTIAL SALES, INC.
Ref. Number: F22000003120

RESUBMIT
Please give original
submission date as file date.

We have received your document for BAIRD & WARNER RESIDENTIAL SALES, INC. and the authorization to debit your account in the amount of \$35.00. However, the document has not been filed and is being returned for the following:

The statutes have changed and only non-profit foreign corporations file the affidavit during the first year of qualification. I have enclosed an amendment form for you to file instead of the affidavit.

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) 245-6823.

Annette Ramsey
OPS

Letter Number: 722A00015262

RECEIVED
2022 JUL 12 AM 11:35
DIV. OF CORPORATIONS
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Baird & Warner Residential Sales, Inc.

name of Corporation

DOCUMENT NUMBER: F22000003120

The enclosed Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Margaret Cabello

Name of Contact Person

Baird & Warner Residential Sales, Inc.

Firm/Company

120 S. LaSalle Street, Suite 2000

Address

Chicago, Illinois 60609

City/State and Zip Code

margaret.cabello@bairdwarner.com

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

For further information concerning this matter, please call:

Margaret Cabello at (312) 857-9566

Name of Contact Person

Area Code & Daytime Telephone number

Enclosed is a check for the following amount:

☒ \$35 Filing Fee

☐ \$43.75 Filing Fee &
Certificate of Status

☐ \$43.75 Filing Fee &
Certified Copy

☐ \$52.50 Filing Fee,
Certificate of Status &
Certified Copy

Mailing Address:

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

Street Address:

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

PROFIT CORPORATION
APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO APPLICATION FOR
AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA
(Pursuant to s. 607.1504, F.S.)

SECTION I
(1-3 MUST BE COMPLETED)

F22000003120

(Document number of corporation (if known))

1. Baird & Warner Residential Sales, Inc.
(Name of corporation as it appears on the records of the Department of State)
2. Illinois 3. May 18, 2022
(Incorporated under laws of) (Date authorized to do business in Florida)

SECTION II
(4-7 COMPLETE ONLY THE APPLICABLE CHANGES)

4. If the amendment changes the name of the corporation, when was the change effected under the laws of its jurisdiction of incorporation? _____
5. _____
(Name of corporation after the amendment, adding suffix "corporation," "company," or "incorporated," or appropriate abbreviation, if not contained in new name of the corporation)

(If new name is unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

6. If the amendment changes the period of duration, indicate new period of duration.

(New duration)

7. If the amendment changes the jurisdiction of incorporation, indicate new jurisdiction.

(New jurisdiction)

8. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent _____

(Florida street address)

New Registered Office Address: _____, Florida _____
(City) (Zip Code)

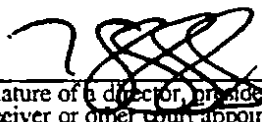
New Registered Agent's Signature, if changing Registered Agent:
I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

9. If the amendment changes person, title or capacity in accordance with 607.1504 (4), indicate that change:

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
Vice President	William Coduto	120 S. LaSalle Street, Suite 2000	<input checked="" type="checkbox"/> Add
		Chicago, Illinois 60603	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

10. Attached is a certificate or document of similar import, evidencing the amendment, authenticated not more than 90 days prior to delivery of the application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the laws of which it is incorporated.


 (Signature of a director, president or other officer - if in the hands of
 a receiver or other court appointed fiduciary, by that fiduciary)

Martin C. Bozarth

Officer-Treasurer

(Typed or printed name of person signing)

(Title of person signing)

FILING FEE \$35.00