## Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet** 

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(((H18000134865 3)))



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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : REGISTERED AGENT SOLUTIONS INC

Account Number : I20100000062 Phone : (888)705-7274

Fax Number

: (888)706-7274

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address:

REGISTERED AGENT CHANGE THORSON BAKER & ASSOCIATES, INC.

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C. GOLDEN

MAY -1 2018



FL H18000134865 3

TO:

Amendment Section Division of Corporations

SUBJECT: THORSON BAKER & ASSOCIATES, INC.

Name of Corporation

DOCUMENT NUMBER: F94000004263

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:

MARY CASTILLO

Name of Contact Person

Registered Agent Solutions, Inc.

Firm/Company

1701 Directors Blvd, Ste 300

Address

Austin, TX 78744

City/State and Zip Code

notices@rasi.com

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

For further information concerning this matter, please call:

MARY CASTILLO

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705-7274

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

CR2E045 (03/12)

04/30/18 09:51AM PDT Registered Agent Solutions, inc. -> Florida SOS 06176380 Pg 3/3

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

statement of cha	inge is submitted for a corporation	617.0502, 607.1508, or 617.1508, Floon on organized under the laws of the Sta or registered agent, or both, in the Sta	ate of OHIO
1. The name of t	the corporation: THORSON E	BAKER & ASSOCIATES, INC	<b>)</b> .
	office address: 3030 W STR		
RICHFIEL			
3. The mailing a			
4. Date of incorp	poration/qualification: 08/17/1	1994 Document number: F	94000004263
	I street address of the current reg tment of State: (If resigned, ente	gistered agent and registered office on ar resigned)	file with the
	CORPORATION SERVI	ICE COMPANY	
	1201 HAYS STREET		AH.
	TALLAHASSEE, FL 323	301-2525	FIL APR 30 GRETARY AHASSE
6. The name and (if changed):	street address of the new registe	ered agent (if changed) and /or registe	CF STA
	Registered Agent Solu	tions, Inc.	39 IE IDA
	155 Office Plaza Dr., S	Suite A	
		). Box NOT acceptable	<del></del>
	Tallahassee, FL 32301		<del></del>
The street address changed will	ess of its registered office and the be identical.	ne street address of the business offic	e of its registered agent,
Such change wa authorized by th	as authorized by resolution duly ne board, or the corporation has	adopted by its board of directors or been notified in writing of the chang	by an officer so le.
S  Gordon		Gordon Baker	Secretary
I hereby accept I further agree to performance of agent. Or, if the	to comply with the provisions of my duties, and I am familiar wi is document is being filed merel	Printed or typed name agent and agree to act in this capacity fall statutes relative to the proper and the and accept the obligation of my poly to reflect a change in the registered to the proper and the registered to the change.	y. id complete osition as registered
Sig	nature of Registered Agent	04/30/2018	<del></del>
	half of an entity:		
	nell - Assistant Secretary	<u>y</u>	
1;	per or a miner manie		

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