Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : CORPORATION SERVICE COMPANY

Account Number : I20000000195 Phone : (850)521-1000 Fax Number : (850)558-1515

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 S.T. BAGGETT, INC.

Certificate of Status	0
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https://efile.sunbiz.org/scripts/efilcovr.exe

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 Nevadain order to change its registered office or registered agent, or both, in the State of Florida.
. The name of the corporation: S.T.BAGGETT, INC.
2. The principal office address: 30302 Esperanza, Rancho Santa Margarita CA 92688
. The principal office activess.
3. The mailing address (if different):
Document number: F9900002504
The name and street address of the current registered agent and registered office on file with the Florida Department of State:
NRAI Services, Inc.
2731 Executive Park Drive, Suite 4
Weston, FL 33331
i. The name and street address of the new registered agent (if changed) and /or registered office (if changed): Corporation Service Company
Corporation Service Company
1201 Hays Street
(P.O. Box NOT acceptable)
Tallahassee, FL 32301
he street address of its registered office and the street address of the business office of its registered agent, s changed will be identical.
such change was authorized by resolution duly adopted by its board of directors or by an officer so uthorized by the board, or the corporation has been notified in writing of the change.
Comment of an ophic of director) Karan Baggett - VP (Signature of an ophic and title)
hereby accept the appointment as registered agent and agree to act in this capacity. further agree to comply with the provisions of all statutes relative to the proper and complete performance f my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this ocument is being filed merely to reflect a change in the registered office address, I hereby confirm that the orporation has been notified in writing of this change.
Corporation Service Company By: Succe (Signature of Registered Agent) (Date)
signing on behalf of an entity:
Grace E. Kirby, Assistant Vice President (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)