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SECRETARY OF STATE PAULAHASSEE, FLORIDA

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STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the limit	ted liability com	npany is: Baldridge-E. Trail, L.L.C.	<u> </u>
		ability company is: 11825 Manchester F	Road, St. Louis, MO 63131
12/03/04		L04000087577	
3. Date of filing/registra	ition in Florida	4. Document nur	nber
5. The name of the regis Florida Department of		the registered office address as shown of	on the records of the
	Kelly Price		
		Name	
	27200 Rivervie	ew Center Blvd., Ste.309	
	·	Address	
	Bonita Springs		
	-	City, State and Zip	
6. The name and address	s of the new regi	istered agent and/or office:	
	NRAI Services	, Inc.	
	2731 Executive	Name e Park Drive, Suite 4	
	Florida stree	et address (P.O. Box NOT acceptable)	67 JAN - SECRETA
	Weston	FL 33331	
		City, State and Zip	FILED JAHY C ASSEE:
confirmed that after the and the business office of liability company, it is he the themselves of the limit the diperating agreement (Signature of a member of atthemselves) (Signature of a member of atthemselves) (I thereby accept the appropriate of the provision and I am familiar with a chapter 608, F.S. Or, is address, I hereby confirmed to the provision of the signature of t	change or change of the registered ereby confirmed to liability composited liability composited liability conjugated representative dge, Manager	of a member)	florida, it is hereby of the registered office of a Florida limited, d by an affirmative vote of ticles of organization or
NRAL Services Inc. (Signature of Registered Agent) Sean L. Emerick, Asst. Se			3 7 8
Divis	ion of Corpora	tions, P.O. Box 6327, Tallahassee, FL	. 32314

FILING FEE: \$25.00

INHS18(10/99)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the limited lia	bility company is: Baldridge-E. Trail,	L.L.C.
2. The mailing address of the	limited liability company is: 11825	Manchester Road, St. Louis, MO 63131
12/03/04	L040	00087577
3. Date of filing/registration i	n Florida 4. D	ocument number
5. The name of the registered a Florida Department of State	agent and the registered office addres	s as shown on the records of the
Kell	y Price	
	Name	
272	00 Riverview Center Blvd., Ste.309	
	Address	
Bonita Springs, FL 34134		FÖ J
	City, State and Zip	
6. The name and address of the	e new registered agent and/or office:	JAN - 4 A SECRETARY C
NRA	l Services, Inc.	
2731	Name Executive Park Drive, Suite 4	9: 5 I
Flo	orida street address (P.O. Box NOT a	cceptable)
Wes	1.0	
	City, State and Zip	
confirmed that after the change and the business office of the r liability company, it is hereby the rhembers of the limited liab the operating agreement of the	is not organized under the laws of the or changes are made, the Florida strength of the egistered agent will be identical. Or confirmed that the change(s) was/we will be identical or company or as otherwise providing the liability company.	eet address of the registered office
Kenneth R. Baldridge,	Manager	
(Frinted or typed name of signee)		
I hereby accept the appointme comply with the provisions of a and I am familiar with and acc Chapter 608, F.S. Or, if this daddress, I hereby confirm that NRAI Services Inc.	nt as registered agent and agree to a ll statutes relative to the proper and ept the obligations of my position as ocument is being filed to merely reflet the limited liability company has bee	ct in this capacity. I further agree to complete performance of my duties, registered agent as provided for in ct a change in the registered office n notified in writing of this change.
(Signature of Registered Agent) Sean L. Emerick, Asst. Secretary Division of	Corporations, P.O. Box 6327, Talla	hassee, FL 32314

FILING FEE: \$25.00

INHS18(10/99)