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| PICK-UP WAIT MAIL | | | | | |
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| (Business Entity Name) | | | | | |
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| Certified Copies Certificates of Status | | | | | |
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| Special Instructions to Filing Officer: | | | | | |
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CHANGE OF ADDRESS OF REGISTERED AGENT

COVER LETTER

TO: Amendment Section Division of Corporations SUBJECT: Baker Sponder Gallery Name of Corporation 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: Deborah Sponder-Levin Name of Contact Person Baker Sponder Gallery Firm/Company 413 E. Palmetto Park Rd, #106 Address Boca Raton, FL 33432 City/State and Zip Code info@spondergallery.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Deborah Sponder-Levin Name of Contact Person

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

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:

Street Address:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassec, FL 32301

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

| statement of cha | provisions of sections of ange is submitted for a er to change its register | corporation organized | under the laws of the | State of Florida | |
|---|--|-------------------------|---|--|--|
| 1. The name of | the corporation: Bake | er Sponder Gall | ery | | |
| 2. The principal | office address: 413 ton, FL 33432 | E Palmetto Parl | k Rd, #106 | | |
| 3. The mailing a | address (if different): | | | | |
| 4. Date of incor | poration/qualification: | 07/26/1989 | _ Document number: | L04570 | |
| | d street address of the crtment of State: (If resign | | and registered office | on file with the | |
| | Deborah Spond | der-Levin | | | |
| 1140 Holland DR, STE 20 | | | | | |
| | Boca Raton, FL | 33487 | | | |
| 6. The name and (if changed): | d street address of the n | | changed) and /or regi | 19 | |
| | Deborah Spond | | | PR N | |
| 413 E. Fairlietto Faik IVD, #100 | | | | | |
| | Boca Raton, FL | • | TIGHT. | | |
| The street address changed will | ess of its registered off be identical. | ice and the street addr | ess of the business of | fice of its registered agent | |
| Such change wa authorized by the | as authorized by resolute, board or the compar | uion duly adopted by i | its board of directors of in writing of the cha | or by an officer so inge. | |
| Signatu | ire of an officer or director | <i></i> | DEBORAH Printed or typed n | PONDER-LEVIN, VP | |
| I further agree performance of agent. Or, if the hereby confirm | the appointment as re to comply with the pro my duties, and I am fa is document is being fi that the dorporation h | vicione of all statutos | relative to the proper | city. and complete position as registered red office address, I | |
| If signing on be | half of an entity: | | , | | |
| DEBORAH | PONDER - L | <u>evin</u> | | | |

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