08000103390

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APR 12 2013 J. BRYAN



March 7, 2013

DEBBIE RODRIGUEZ BAKER BARRIOS ARCHITECTS, INC. 189 S. ORANGE AVENUE, #1700 ORLANDO, FL 32801

SUBJECT: BAKER BARRIOS AND ACOSTA P.L.

Ref. Number: L08000103390



We have received your document for BAKER BARRIOS AND ACOSTA P.L. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You completed the wrong form

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6051.

Joey Bryan Regulatory Specialist II

Letter Number: 913A00005431

COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: Baker Barries and Name of Limited Lial	d Acosta, PL		
Name of Limited Liability Company			
Dear Sir or Madam:			
The enclosed Registered Agent/Registered Office Chang	ge and fee(s) are submitted for filing.		
Please return all correspondence concerning this matter	to the following:		
Debbie Rodriguez Name of Person	MISAPRITALLAHASSEE		
Baker Barrios Architects,	Inc.		
189 5.0 range Ave. #170	<u>D</u>		
Orlando FL 32801 City/State and Zip Code			
drodriqueze bakerbarrios. Com E-mail address: (tobe used for future annual report notification)			
For further information concerning this matter, please call:			
Debbie Rodriguez at (40	1 926-3000 Area Code & Daytime Telephone Number		
Registration Section F Division of Corporations E Clifton Building F	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314		
Enclosed is a check for the following amount:			
□ \$25 Filing Fee	\$55 Filing Fee & Certified Copy		



ORLANDO

189 S. ORANGE AVE

SUITE 1700

ORLANDO, FLORIDA

32801

407.926.3000

AMH)2361 10260214,7

COMMERCIAL

CORPORATE

EDUCATION

ENTERTAINMENT

HEALTHCARE

HOSPITALITY

INDUSTRIAL

MIXED-USE

RESIDENTIAL

RETAIL

March 28, 2013

Mr. Joey Bryan Florida Department of State Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Re:

Request Refund of Overage Paid Registered Agent Change Form

Baker Barrios and Acosta, PL. - Ref #: L08000103390

Dear Mr. Bryan,

Per our conversation on March 28, 2013, I am respectfully requesting that the overage of \$10.00 be refunded to Baker Barrios from the overpayment of the incorrectly filed Registered Agent change form fee. The check can be made payable and mailed to:

Baker Barrios Architects, Inc. 189 S. Orange Ave., Suite 1700 Orlando, FL 32801

Also, attached is the correct registered agent change form per your letter dated March 7, 2013 (Letter Number: 913A00005431).

If you have any questions, please give me a call at 407-926-3000.

Sincerely,

Baker Barrios Architects, Inc.

Debbie Rodriguez

Office Manager / Executive Assistant

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. Name of the limited liability company: Baker P	sarrios and Acosta, PL
2. (a) Principal office address of limited liability company (<i>Note: MUST BE STREET ADDRESS</i>)	Suite 1700 Onando, Fc 32801
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
3. Date of filing/registration in Florida	L08006103390 4. Document number
5. (a) Registered Agent and Registered Office shown on	the records of the Florida Dept. of State:
Registered Agent:	Frank A. Hamner, PA
Registered Office Address:	1011 N. Mymore Rd.
	Winter Park, FC 32789
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NE</u>	W Registered Office address:
NEW Registered Agent:	Marchena and Graham, PA
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	976 Lake Baldwin Lane Suite 101 Orlando FL 32814
If the limited liability company is not organized under the confirmed that after the change or changes are made, the F and the business office of the registered agent will be ident liability company, it is hereby confirmed that the change(s) the members of the limited liability company or as otherwithe operating agreement of the limited liability company. Signature of amember of authorized representative of a member Printed or typed name of signee I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the provision of all statutes relative to the provision of all statutes relative to the provision of the limited liability company. Signature of Registered Alent Division of Corporations, P.O. Box 63	gree to act in this capacity. I further agree to open and complete performance of my duties, sition as registered agent as provided for in rely reflect a change in the registered office whas been notified in writing of this change.
FILING FEE. S	