

412000129114

(Requestor's Name)

(Address)

(Address)

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PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA
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NOV 19 2013

T. BROWN

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Bait Bagger, LLC
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Jason Hazlewood

Name of Person

Firm/Company

17 Royal Palm Way, Unit 202

Address

Roca Ratón, FL 33432

City/State and Zip Code

Jason.Hazlewood@gmail.com

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

For further information concerning this matter, please call:

Jason Hazlewood

Name of Person

at (954) 821-2570

Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 25, 2013

JASON HAZLEWOOD
BAITBALLER, LLC
17 ROYAL PALM WAY UNIT 202
BOCA RATON, FL 33432

SUBJECT: BAITBALLER, LLC
Ref. Number: L12000129114

We have received your document for BAITBALLER, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a corporation, but your entity is a limited liability company. Please complete and return the enclosed blank form(s).

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.

Teresa Brown
Regulatory Specialist II

Letter Number: 513A00024962

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: Bait Beller, LLC

2. (a) Principal office address of limited liability company: 17 Royal Palm Way
unit 202
Boca Raton, FL 33432

(Note: MUST BE STREET ADDRESS)

(b) Mailing address of limited liability company: 17 Royal Palm Way
unit 202
Boca Raton, FL 33432

(Note: MAY BE POST OFFICE BOX)

10/10/2012
3. Date of filing/registration in Florida

4. Document number L12000129114

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Agent: United States Corporation Agents, Inc

Registered Office Address: 13302 Winding Oak Court, A
Tampa, FL 33612

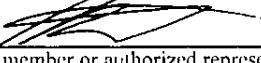
(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:

NEW Registered Agent: Jason Hazewood

NEW Registered Office Address: 17 Royal Palm Way
unit 202
Boca Raton FL 33432

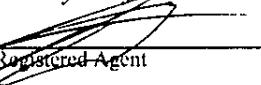
(MUST BE FLORIDA STREET ADDRESS)

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.


Signature of a member or authorized representative of a member

Jason Hazewood
Printed or typed name of signee

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.


Signature of Registered Agent

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314
FILING FEE: \$25.00

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA
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