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COVER LETTER

TO: Registration Section Division of Corporations						
Baik Holdings LLC						
Name of Limited Liability Company						
Dear Sir or Madam:						
The enclosed Registered Agent/Registered Office Char	nge and fee(s) are submitted for filing.					
Please return all correspondence concerning this matter	r to the following:					
Joseph Baik						
Name of Person	**************************************					
Baik Holdings LLC						
Firm/Company						
3225 S. MacDill Ave, Suite 129-244						
Address						
Tampa, Florida 33629	•					
City/State and Zip Code						
jbaik@gammapropertygroup.com						
E-mail address: (to be used for future annual repo	ort notification)	روا (س) کاروری موسید کاروری				
For further information concerning this matter, please	call:					
Joseph Baik	813 253-3262	in the case of the				
Name of Person	Area Code & Daytime Teleph	ione 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 amoun	it:					
☑ \$25 Filing Fee	□ \$55 Filing Fee & Certified Copy					

INHS18 (2/14)

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

Pursuant to the provisions of sections 605.0114 or 605.0116, 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.	Na	me of the limited liability company: Baik Holding	gs LLC		
2.	(a)		(b)))	
		Principal office address of limited hability company: (Note: MUST BE STREET ADDRESS)	_	N	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
		3225 S. MacDill Ave, Suite 129-244		3225 S	. MacDill Ave, Suite 129-244
		Tampa, FL 33629	-	Tampa	, FL 33629
		02/21/2014		L140000	029855
3.		Date of filing/registration in Florida	4.		Document number
5	(a)				
J.	(a)	Registered Agent and Registered Office shown on the records of the	he Florida	Dept. of State	- e:
		Joseph Y. Baik			
		Registered Office Address (MUST BE FLORIDA STREET A	DDRESS	<u> </u>	-
		2311 W. Morrison Ave # 22			
		Tampa	3362		
		, FL			是
	(b)	Enter name of NEW Registered Agent and/or NEW Registered	Office add	lress.	See to design
		Enter that to street the street that the the street th	CATTLE HER		
		Joseph Y. Baik			
		NEW Registered Office Address:			· Service Serv
		3225 S. MacDill Ave, Suite 129-244			्रेटि ज
					-
		Tampa .FL	3362	9	
the ag wa	e cha ent v is/wo	mited liability company is not organized under the law nge or changes are made, the Florida street address of vill be identical. Or, in the case of a Florida limited lia are authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	the regis bility co f the lim	tered office mpany, it is ited liability iability con	e and the business office of the registered is hereby confirmed that the change(s) y company or as otherwise provided in inpany.
_	Sional	ure of a member or authorized representative of a member		<u> </u>	PH Y BATK Printed or typed name of signee
I pr the to no	herei ovisi e obl mere tified	by accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete igations of my position as registered agent as provided by reflect a change in the registered office address, I have the control of this change. I have the control of this change.	ee to act performa I for in C iereby co		