

N1800000 9148

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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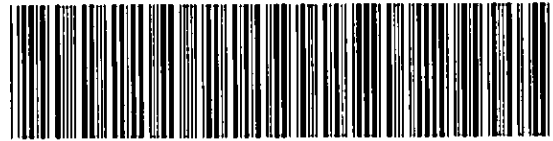
(Business Entity Name)

(Document Number)

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**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** BAY AREA KNITTING GUILD, INC

Name of Corporation

**DOCUMENT NUMBER:** N18000009148

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:

**Robin Fremer**

Name of Contact Person

Firm/Company

**PO Box 816**

Address

**Dunedin, Florida 34697-0816**

City/State and Zip Code

**bayareakg@gmail.com**

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

For further information concerning this matter, please call:

**Robin Fremer**

Name of Contact Person

at ( **614** ) **940-3814**

Area Code & Daytime Telephone Number

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

**Mailing Address:**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**  
Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

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STATE DEPT OF STATE  
DIV OF CORPORATIONS  
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**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Bay Area Knitting Guild, Inc
2. The principal office address: 4919 Ann Dr, Holiday, FL 34690
3. The mailing address (if different): PO Box 816, Dunedin, FL 34697-0816

4. Date of incorporation/qualification: Sep 01, 2018 Document number: N18000009148

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

Maureen L Garner - resigned

7820 42nd St

Pinellas Park, FL 33781

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Robin Fremer

4919 Ann Dr

P.O. Box NOT acceptable

Holiday, FL 34690

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CORPORATION

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

Susan Retmeyer  
Signature of an officer or director

Susan Retmeyer President  
Printed or typed name and title

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 obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

Robin Fremer  
Signature of Registered Agent

11/19/19  
Date

If signing on behalf of an entity:

Robin Fremer  
Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE  
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314