## N9900002977

(Requestor's Name)						
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(Address)						
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PICK-UP	☐ WAIT	MAIL.				
(Business Entity Name)						
(Document Number)						
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SECRETARY OF STATE AND ASSET FOR DRING

R.A. Change

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## TRANSMITTAL LETTER

ŢO:	Amendment Section Division of Corporations	
SUBJ	IECT: FERNANDI	NA BEACH BABE RUTH LEAGUE, INC.
~~~		(Name of corporation)
DOC	UMENT NUMBER:	N99000002977 -
The e	nclosed Statement of Chang	ge of Registered Office/Agent and fee are submitted for filing
Please	e return all correspondence	concerning this matter to the following:
	SARAH F. ADAMS	
	(Name of p	erson)
		BE RUTH LEAGUE, INC.
	(Name of firm/o	company)
_	Post Office Box 722	
	(Addres	ss)
	Fernandina Beach, F	L 32034
	(City/state and	zip code)
For fu	arther information concerning	ng this matter, please call:
	Karen Miller	at ( 904 ) 753-1622
	(Name of person)	at (904) 753-1622 (Area code & daytime telephone number)
Enclo	sed is a \$35.00 check made	e payable to the Department of State.
Amen Divisi P.O. I	ng Address: adment Section ion of Corporations Box 6327 nassee, FL 32314	Street Address: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399

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

				1.1308, or 617.1308 Under the laws of th	
- Florida	in order to c	change its regist	ered office or	registered agent, or	both, in the State
of Florida.					
1. The name of t	he corporation:	FERNANDINA	BEACH BABE	RUTH LEAGUE, I	NG.
2. The principal	office address:	1001 Beech	Street, Fe	rnandina Beach,	FL 32034
3. The mailing a	ddress (if different	): Post Office	Box 722,	Fernandina Beac	h, FL 32035
4. Date of incorp	oration/qualificati	on: 05-10-99	D	ocument number:	N990000002977
5. The name and	street address of t	he current registe	ered agent and	l registered office on	file with the
Florida Depar	tment of State:				40 8
		Sarah F. Ad	lams		
•		617 South 6	th Street		- 超 82
-		Fernandina	Reach, FI.	32034	- 3557
		- CHIGHTIN	Deadli, 11	`changed) and /or re	
6. The name an	d street address of	f the new registe	ered agent (if	changed) and /or re	egistered office (if
changed): _		Karen Mille			
		3674 Durder	ı Road		
_		(P.O. Box or personal m	ailbox NOT accept	able)	·
_		Yulee, FL	32097		
The street addre agent, as change	ss of its registered ed will be identical	office and the s	treet address	of the business offic	e of its registered
Such change was authorized by the	s authorized by re le board, or the co	solution duly ad poration has bee	opted by its b en notified in	oard of directors or writing of the chang	by an officer so ge.
(Signature of an officer,	chairman or vice chairman	of the board)	Karen M	iller	<del></del>
performance of registered agent	my duties, and I a t. Or, if this docur	m familiar with a nent is being file	and accept the ed merely to r	to act in this capaci tive to the proper a e obligation of my p eflect a change in th totified in writing of	osition as ie registered
Kare.	in Mil	le	April	, 2003	
1	gnature of Registered Ager	nt)		(Date)	
If signing on behalf	-				
Karen M:	111er 'yped or Printed Name)		Pres	ident (Capacity)	
ζ-		* * * FILING F	EE: \$35.00 °		